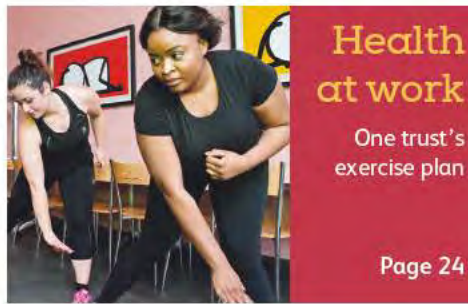




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Pulmonary rehab
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Health at work
One trust's exercise plan
Page 24



Student conference
Read our round-up from Leeds
Page 16

Frontline

THE PHYSIOTHERAPY MAGAZINE FOR CSP MEMBERS

17 February 2016
Volume 22
Issue 4



Learning a new skill
Why every experience counts

Inside: Jobs • Physio findings • Courses • In person

ELEVATE

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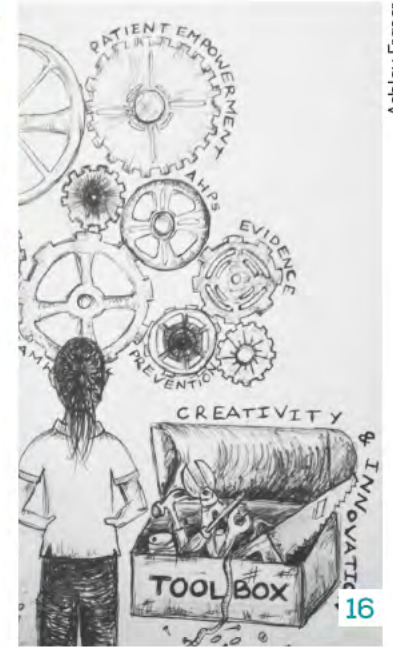
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Ashley Fraser



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Comment



Write to us
email your letters to
frontline@csp.org.uk

Learning to fall

Do you remember the first time you rode a bike? As a toddler I loved the thrill of riding on the cross bar of my dad's bike. Then I got my own bike for Christmas and remember wobbling along on stabilisers before I learnt that, if I went fast enough, I could manage without them.

Eventually I took to the road and now – many years later – I'm still learning: including lessons from the couple of near misses I've had.

So the image on our cover, of a toddler on a tricycle, hit a chord about how we're all learning, no matter what stage we are in our lives, careers or relationships.

For many of you the Health and Care Professions Council biennial registration process will be on your mind – particularly if you need to submit evidence of your continuing professional

'If I haven't made three good mistakes in a week, then I'm not worth anything. You only learn from mistakes.'
David Bowie

development. Gwyn Owen's article (page 28) is a must read. She argues that we learn not just from doing, but from reflecting on things that didn't quite go the way we wanted.

I was also taken recently, in the coverage of David Bowie's death, by a comment he made in 1977: 'If I haven't made three good mistakes in a week, then I'm not worth anything. You only learn from mistakes.'

None of us wants to make a mistake, particularly if it affects patient care. But like learning to ride a bike, it takes practice, patience and persistence to be good at a job.

That means accepting that you will continue to fall sometimes. And that you can learn from others how to survive – albeit with a few bruises – even when you've years of experience.

Lynn Eaton
managing editor *Frontline* and head of CSP member communications
eatonl@csp.org.uk



Don't forget Nepal

Since the earthquake in Nepal last April demand for physiotherapy has rocketed because of the large number of people who were injured. The Leprosy Mission England and Wales supports a hospital in Anandaban, southern Nepal, where they have been providing post-operation and injury rehabilitation even for those who do not have leprosy, as it's the only hospital for miles.

To find out more, visit: www.leprosymission.org.uk

Rose Taylor, media and publications officer, Leprosy Mission England and Wales



Wheelchair mission

The topic of equipment donation (www.csp.org.uk/node/952438) has sparked a lot of discussion in the ADAPT community, the professional network for Chartered Physiotherapists in International Health and Development. We discussed the matter at a study day and the topic remains ongoing.

The need for assistive devices such as wheelchairs in less resourced countries is clear. However there have been many examples of how supply of equipment has not matched the true need, leading to provision of equipment not suitable for the environment, or suboptimal seating causing more harm than good. We are interested in how Michael Shakey, the Through the Roof charity, or any other

readers who are experienced in this field have tackled these issues, and how they augment current practice. The summary of our debate and a consensus ADAPT opinion can be found at <http://adapt.csp.org.uk/frequently-asked-questions>. We would welcome your comments on this.

Guidelines on the provision of manual wheelchairs in less-resourced countries have been published by the World Health Organization (WHO). They highlight that wheelchair provision can make the difference between exclusion call for:

- wheelchairs must meet individual needs and environmental conditions.
- guidance on the design and selection of wheelchairs and how to produce and supply them.
- collaboration with related services

You've added...

Replying to the editor's comment on student numbers 'Sting in the tail' (20 January), hjs said:

■ Perhaps if students are

paying for their degree, they won't accept the derisory pay packet as evidenced by the advert on Physiotherapy News 4 Feb for "Highly Specialist

Physio" ...£26,302 - £35,225

Meanwhile our Clinical Update on Parkinson's (6 January) won praise from Mariella Graziano:

■ I find the Clinical update: Parkinson's relevant for



Follow us
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Comment
join the debate online at
www.csp.org.uk



Niranjan Shrestha/AP/Press Association

A woman who lost a leg in the earthquake looks at her prosthetic while practicing to walk with it at a rehab centre in Nepal

Top Tweets

Members have been as busy tweeting as ever!

Nice to hear from you about Frontline content

■ **rockphysiouk** tweeted: Great to see #mindfulness mentioned @thecsp The mind leads the body in recovery!

While **sheffsportsmed** had seen the online version of our article about skiing injuries (published in print on page 12)

■ Great to see @joehides story featured

CSP officer **suehaywardgiles** tweeted from a CSP meeting about devolution:

■ Interested 2 hear @thecsp Manchester member views about #DevoManc & explore how 2 influence for best #patientcare

And another staff member, **mrtomgill** tweeted images of London physio

■ @thecsp steward Melissa among trade unionists handing in 200k petition to No.10 #TUBill #heartunions



Follow us on Twitter at **@thecsp**

for strategic service delivery is essential.

■ training for wheelchair providers is essential.

■ the role of policy and policy-makers in wheelchair provision, with emphasis on cost-effectiveness and sustainability.

Readers who are interested in volunteering with Through the Roof or any other organisation working in low or middle income countries are encouraged to join ADAPT. Online registration makes it is even easier to join us. Visit <http://adapt.csp.org.uk>

■ **Hannah Louissaint**, public relations officer, ADAPT (for the ADAPT committee)

Private matters

Being a physiotherapist in private practice I was taken a back a little by the article titled 'Is the grass really greener.' (www.csp.org.uk/node/953472)

Liz Cowan works as a neuro-physiotherapist dealing with patients who are undergoing legal cases and claims. This is a very small representation of the private sector, most of it made up of practitioners specialising in the musculoskeletal (MSK) field.

The society that represents physiotherapists in private practice, Physio First, runs business courses in which you will see how building your business on medico-legal

cases is building a business on quicksand as well as devaluing the service you offer and the profession as a whole.

Liz also raises the fact that she now works to outcome measures and measurable standards; surely this is the same in the NHS? By measuring your outcomes you can add real value to your business or service as you have the data to prove your worth.

Such a polarising article does nothing to move us forward as a cohesive profession striving to do the best for our patients.

■ **Tobias Bremer**, clinical director and lead physiotherapist, Brighton Physio Clinic

physiotherapists in clinical practice and a good summary of where the field is so far on physiotherapy guideline.'

And **clgrm1** posted on 2 Feb, 2016 to our Mid-Essex story

■ This is... good news but feels more like a stay of execution for physiotherapy services at Mid Essex CCG ... Well done to the CSP ... but come on providers ... start thinking creatively about your services.

Got something to say?

Write to us or comment on articles from the latest issue of *Frontline*. Log in at: www.csp.org.uk/frontline and then go to the current issue section. You will also find icons to like on Facebook or tweet articles. Comments posted online may be edited for print.

icsptalk

Interested in recent topical discussion? If so, read our selection below.

ICSP is our peer led knowledge sharing area of the website – view all our popular discussions www.csp.org.uk/popular

Setting a private practice from home

Insurance, technology, financial and data laws can my complicated and perplexing but members of this discussion are seeking to demystify and share how to best start up a private practice.

Comments: 15

Network: Musculoskeletal
www.csp.org.uk/node/954188

Core stability Pilates-based exercises

A member is seeking to setup a core stability exercise programme for people with MS but the evidence in this area is very limited. Has any member setup something similar and what advice can you offer in general?

Comments: 15

Network: Neurology
www.csp.org.uk/node/954000

Are physician associates a threat to advanced practitioners?

Members discuss why new physician associates roles are being created when physiotherapist are well placed to fulfil these positions.

Comments: 15

Network: Profession wide
www.csp.org.uk/node/950274

Chaperones

Members debate their employers' policy on using chaperones and the challenges this raises, citing CSP and General Medical Council guidance.

Comments: 11

Network: Pelvic obstetric gynaecological
www.csp.org.uk/node/944744

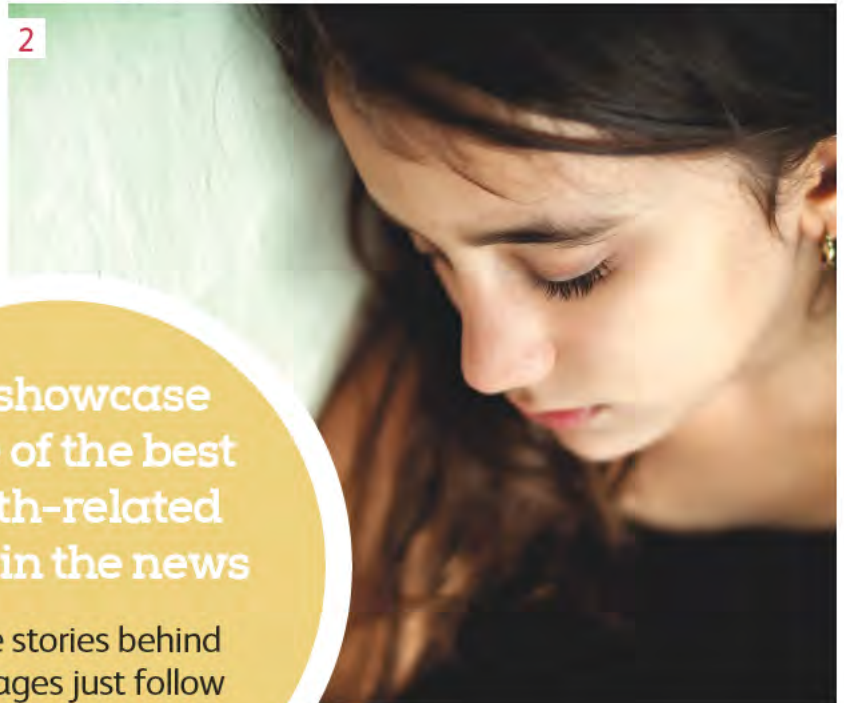
News in Pictures

1



Prof J Leveille/ Science Photo Library

2



We showcase some of the best health-related items in the news

For the stories behind the images just follow the shortcut codes

1 The prevalence of debilitating brain diseases, such as Alzheimer's, has collapsed by more than 22 per cent in 20 years in three study areas in England, potentially because of better education and healthier lifestyles. Source: Daily Telegraph <http://bit.ly/1NZmuX7>

2 The number of children diagnosed with mental illnesses has more than doubled in five years and cases of intentional self-harm have also surged. Source: The Independent <http://ind.pn/104s5eG>

3 As the Six Nations tournament kicks off, new guidelines are offering players more protection. And there is undoubtedly more awareness of the dangers of repeated head injuries and the symptoms of concussion, which does not

always lead to a loss of consciousness.

Source: BBC <http://bbc.in/1Wgghw1>

4 Inflation-busting increases in the cost of care homes are putting older people at risk of eviction, according to a damning report into the industry. Source: The Times (no link)

5 The drink-driving limit in England and Wales may be lowered to make it illegal to drive after one pint of lager or a small glass of wine, the government has indicated. Source: Daily Telegraph <http://bit.ly/1V2RaMZ>

6 Babies given paracetamol are nearly a third more likely to develop asthma. Source: Daily Mail <http://dailym.ai/1LgOIGJ>



4



Niall Carson/PA Wire/Press Association Images

Frontline

Got a news story or idea for Frontline?

See www.csp.org.uk/ideasforfrontline for details of how to contribute, email frontline@csp.org.uk with a short summary and your phone number or call the news desk on 020 7306 6665

Want to send us a photo?

Use our datasend photo service. For details see 'photographs' at: www.csp.org.uk/ideasforfrontline

Want to place an advert?

Reach a 50,000+ physiotherapy audience with your product, course or recruitment ad. cspads@media-shed.co.uk 0845 600 1394

Got an item for Networks & networking?

networksads@csp.org.uk 020 7306 6166

Contact the CSP

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14 Bedford Row London WC1R 4ED
Members have access to the CSP's journal, *Physiotherapy*. www.csp.org.uk/journal

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Deborah Ripley/Alamy Stock Photo



NewsDigest

Wales to boost physio student places



Wales will offer physiotherapy training places to 134 students this year

The number of places on the only physiotherapy degree course in Wales will rise by 10 per cent this year, the Welsh government has announced.

This year there will be 134 places at Cardiff University, up from 121 in 2015. Funding comes from an £85 million investment package intended to boost the number of health professionals in Wales.

Peter Finch, assistant director of employment relations and union services at the CSP, said: 'We are very pleased about the increase, which reflects the growing need for physio services in the Welsh NHS.'

'What the CSP wants to do now is ensure that when this cohort of graduates enters the workforce in 2019, their skills are fully utilised and they are fairly rewarded for their contribution.'

Mark Drakeford, the health and social services minister, said: 'This investment is based on what NHS organisations have told us they need to maintain services.'

'Despite the financial pressures faced during recent years

Healthcare in the UK is 'average', says international report

Healthcare systems in England, Scotland, Wales and Northern Ireland are performing equally well, but the UK is 'average' on an international scale. This is according to a report on the quality of healthcare in the UK, published by the Organisation for Economic Co-operation and Development (OECD) earlier this month. The report found there was a 'clear and consistent commitment to quality of care in all of the health systems' in the UK. But it says the quality of health care in the UK is 'no better than average' when compared to other countries. See: bit.ly/1QbbKGv

Hunt's 'sledgehammer' tactics on doctors' pay slammed by CSP

The decision by health secretary Jeremy Hunt to impose a controversial new contract, announced on 11 February, on junior doctors in England has been criticised by the CSP.

Chief executive Karen Middleton said: 'Imposing the contract is a poor way to conduct industrial relations and risks creating a climate of distrust from the very beginning of any future negotiations between the government and health unions.'

'Ironically, it also undermines the drive to create the seven-day NHS that Mr Hunt desires because

for those services to be safe and effective for patients, they must be adequately resourced and designed in collaboration with staff.'

'The damaging rift he has caused through sledgehammer tactics make achieving that goal increasingly unlikely. That is unacceptable for the patients who would benefit from access to weekend services where there is a genuine clinical case for providing them.'

More on seven day services:
www.csp.org.uk/node/893537



Something to add?
email *Frontline* at
frontline@csp.org.uk

places by 10%

'We are very pleased with the increase which reflects the growing need for physio services in the Welsh NHS'

Peter Finch

we have continued to invest in education and training for health professionals in Wales. This year is no exception.'

Welsh government data shows that the number of people directly employed by NHS Wales now stands at 84,000, an increase of a third since 1999.

■ *Gill Hitchcock*

CSP urges MPs to recommend increasing physio student places

An influential group of MPs should tell the government to increase the number of places on physiotherapy degree courses in England, according to the CSP.

The society's call follows Health Education England's (HEE) announcement of a 6.7 per cent cut in training places next year.

In written evidence to MPs on parliament's health select committee, the society stresses there are already significant difficulties in recruiting physiotherapists across the NHS.

The CSP's research shows that the profession needs an extra 1,500 students places in each

of the next three years just to keep pace with growing demand.

Another key part of the CSP's submission is a call for an urgent review of how practice education placements are supported. It tells the MPs there must be a level playing field in the allocation of funding for placements across all the health professions.

■ *Gill Hitchcock*

CSP research shows the profession needs an extra **1,500** student places in each of the next three years

More information

www.csp.org.uk/press-policy/policy/consultations

Physio students help university staff get fit

Physiotherapy students in the west of England are leading exercise classes for staff at their university, and conducting research into the benefits.

The final year students are taking part in a six-week pilot project at the University of the West of England (UWE).

Staff are being offered a range of workplace classes, including salsa, Tai Chi, yoga, aerobics and Pilates and the results are being monitored for use in the students' final year dissertations.

The project is the brainchild of physio lecturers Lois Stevens and Rachel Thomas. Ms Stevens said the aim of the classes is to combine real world health

promotion opportunities with the experience of volunteering.

'We also hope to provide opportunities for students to research this important area through their third year dissertations.'

The biggest up-take of the classes has been among administrative staff, 'which is great as we wanted to target people whose roles were predominantly sedentary,' said Ms Stevens. 'Not only is it a good opportunity to get people away from their desks, but hopefully it will encourage them to seek further exercise opportunities outside of the workplace.'

■ *Robert Millett*



Physiotherapy students Enfy Jones and Alice Williams lead an exercise class for staff at UWE under the supervision of senior physio lecturer Rachel Thomas

NewsDigest

Exercise plan must be part of CO

Many people with chronic obstructive pulmonary disease (COPD) are not being referred for rehabilitation, researchers have concluded.

A report for the national COPD audit programme also says that 37 per cent of people in England and Wales are waiting longer than the three months recommended in British Thoracic Society quality standards.

And of those who do receive pulmonary rehabilitation, 40 per cent do not complete their programme, according

to the document titled Pulmonary Rehabilitation: Steps to Breathe Better.

In recommendations aimed at commissioners, provider organisations, referrers for rehabilitation and practitioners the report says

- local pulmonary rehab programmes should make sure all patients attending a discharge assessment get a written, individualised plan for ongoing exercise
- all programmes must have the capacity to assess and enrol all patients within three

months of referral

- and programmes must be designed to encourage patients to complete their treatment

The report was welcomed by Jane Simpson, the physiotherapy clinical lead for the adult respiratory and rehabilitation team in Tower Hamlets, part of Barts Health NHS Trust in London.

'A combination of rehabilitation and education

– about the condition, and how it can be managed and self-managed – is really important and has such a strong evidence base,' she said.

The report is based on research with nearly 7,500 patients who were assessed for pulmonary rehabilitation by 210 programmes across England

37%
of people in England and Wales are waiting longer than the recommended 3 months

Physiotherapists offer the cheapest option for writing prescriptions says report

The cost of writing a prescription is lower for physiotherapists who have independent prescribing rights than for pharmacists or other groups.

That is the finding of the Non-Medical Prescribing an Economic Evaluation report by NHS Health Education North West.

The document provides an economic evaluation of seven prescribing disciplines in England, including physiotherapy, pharmacy, nursing and midwifery.

Researchers found that the average cost of writing a prescription, which is estimated to take up five minutes of an appointment, is £10.50 for pharmacists but only £3 for physiotherapists. The average cost for nurses is £5.77.

CSP professional adviser Pip White was closely involved in the campaign for independent prescribing rights

for physiotherapists.

She said: 'This is the first evidence we've had that physiotherapists can offer cost-effective prescribing alternatives to doctors, and that writing a prescription is not – in itself – expensive.'

'The added time to write a prescription is five minutes or less, so the cost of that extra time is very little.'

'I'm sure further evidence will show the positive impact on patient outcomes, as prescribing skills allow physios to manage whole care pathways in a cost-effective manner.'

■ Robert Millett

More information
To view the report visit:
<http://bit.ly/1K9NwQL>



Something to add?
email *Frontline* at
frontline@csp.org.uk

PD rehab

and Wales over three months in early 2015.

■ Gill Hitchcock

More information

Pulmonary Rehabilitation:
Steps to Breathe Better

<http://bit.ly/1V8rcHG>

For further information on what guidelines say about pulmonary rehabilitation classes, take a look at the Inspire resource www.csp.org.uk/inspire



Asadour Guzelian/Guzelian

The report reveals significant variations in waiting times and quality of care for pulmonary rehab

Arthritis Research UK seeks student interns

Physio students have an opportunity to apply for internships with research projects focused on rheumatic and musculoskeletal diseases. The Arthritis Research UK internship scheme is open to final year students and recent graduates who have an existing or predicted first or 2.1 class degree.

Applications must be submitted by 5pm on 11 March 2016. For details of how to apply, contact programme co-ordinator Mary Fry by emailing m.l.fry@soton.ac.uk.

Peer urges NHS to make better use of AHPs

NHS trusts need to make better use of physios and other allied health professionals (AHPs).

This is according to an independent report by Lord Carter commissioned by the Department of Health and published earlier this month.

Lord Carter's review of productivity and performance in hospitals highlights 'unwarranted variations' in the way trusts make use of AHPs.

It says AHPs make a significant contribution to admission and discharge processes, but in some trusts their benefits are 'often not fully realised'.

In addition, the report says there is a need to identify 'what good looks like' so that trusts can adopt a more consistent approach to the management and deployment of AHPs and improve recognition of the diversity of AHP roles and professions.

To combat this and other challenges, the report sets out a series of recommendations that aim to save the NHS £5 billion a year by 2020.

These include

- improving the understanding of how the AHP workforce is configured in each trust
- developing and implementing measures for analysing staff deployment, including metrics such as 'care hours per patient day'

The recommendations aim to save the NHS **£5bn** a year

Meanwhile a report from the National Audit Office on clinical staffing recommends that the Department of Health, Health Education England and NHS Improvement should provide greater national leadership to help trusts address staffing shortfalls.

■ Robert Millett

More information

Operational productivity and performance in English NHS acute hospitals by Lord Carter of Coles <http://bit.ly/1o6BxK8>
Managing the supply of NHS clinical staff in England: www.nao.org.uk



Lord Carter says the benefits of AHPs are not fully realised by some NHS trusts

NewsDigest

Get fit before you hit the slopes urge physios in French skiing

Physiotherapists in French ski resorts have hit back at media reports that off-piste drinking is causing an increase in accidents.

They have denied that harmful après ski behaviour is on the rise and encouraged pre-season exercise as the best way to prevent injury.

Louise Allison, clinical lead physio at the Bonne Santé practice and now in her tenth season at the Val D'Isere ski resort, said: 'I was a chalet girl in Val d'Isere over 15

years ago, and it was no different then. It's definitely an issue, but I don't think it's any more now than it has been before.'

Snow conditions

With about 100 CSP members working through the skiing season in France, physios say injuries instead depend on the snow conditions and, most importantly, the skiers' fitness before they hit the slopes.

'We see people who have

niggling backs, that are a lot worse when the snow is hard-packed, icy and less forgiving,' Mrs Allison said.

'When we have a lot of snow, that's when we see more knee ligament issues as skis are more likely to catch in deep snow and result in twisting forces that are transferred to the knee.

'Today I have three anterior cruciate ligament and two medial collateral ligament appointments.'

She believes these injuries can be avoided with fitness, strength and endurance training before holidaymakers set off for their skiing breaks.

About
100
CSP members are
working through
the ski season
in France

Moving better

Personalised programmes to prepare people for their skiing holidays are led by David Wales, at Central Health Physiotherapy in London.

'The concept of being able to modify risk factors to prevent injury is used widely in sport, but not yet with the public,' he said.

'The emphasis is on improving alignment and stability. What we're trying to do is improve that person's neuro-muscular control.

'If the person can move better, their risk of injury is reduced.'

'Even if they're fit and sporty, people go from doing a couple of hours in the gym each day, to trying to ski all day every day for a week.'

Ginny Christy

'Most important is preparing for the skiing holiday,' Mrs Allison said. 'Making sure they're well-conditioned before they come out here and that they've got good levels of fitness to be able to perform at altitude.'

Fatigue is one of the biggest factors why ski injuries occur, she said. 'Skiers should not only prepare through fitness training before they come away but they should also pace themselves on the slopes.'





Something to add?
email *Frontline* at
frontline@csp.org.uk

pes, resorts



Louise Allison treating in
a Val d'Iserre clinic and
on the slopes (right)



Preventive role

Ginny Christy, the owner of Alpine Therapies, a mobile physio, Pilates and massage service operating in Courchevel and Meribel, agreed that many injuries can be caused by events before the skier even sets foot on the snow.

'We see people who have chronic back pain who come skiing and find it gets worse,' Mrs Christy said.

'Even if they're fit and sporty, people go from doing a couple of hours maximum at the gym each day, to trying to ski all day every day for a week. It's much more intense than what they've been doing at home,' she said.

■ *Lucy Middleton*



Physio Ginny Christy
who runs a mobile clinic

More information

If you are interested in working
in France during the ski season,
contact international@csp.org.uk



NewsDigest

Survey aims to end 'invisible' use of foot orthoses

Researchers at the University of Salford, Manchester, are keen to hear from physiotherapists who use foot orthoses to treat patients.

The team, which is based in the school of health sciences, has launched a national survey to discover which health professions provide foot orthoses. They also want to know what type of patients and devices are involved.

The academics want to learn about the variations between individual clinicians and professional groups in the use of foot orthoses. How skills in using orthoses are developed and how research informs practice are other research topics.

Chris Nester, a podiatrist and professor who heads the research programme, said: 'We are pretty convinced that foot orthoses are a good intervention, but the NHS is struggling to understand where they are provided.'

'While podiatry and orthotists have a strong voice in this field, other professions are not represented.'

'And we are trying to capture the range of patient groups that are benefiting, to identify variations in provision and create standards.'

Last November NHS England called for local commissioners to improve how orthoses are provided. Alongside this, it issued a set of guidance and resources to help them.

Its advice included looking at case studies to inform the most appropriate commissioning model for an area, and involving service users in performance reviews of the service. The National Foot Orthotics Survey is open until June.

■ Gill Hitchcock

More information
National Foot Orthotics Survey
<http://bit.ly/1PEWeGX>
NHS England Improving the Quality of Orthotics Services in England,
<http://bit.ly/1nRS4RX>

Flu jab rate drops among NHS staff

Fewer than half of frontline staff in NHS organisations in England had a vaccination against this winter's flu bugs. A survey of 263 organisations by Public Health England showed a vaccination rate of 47.6 per cent in 2015-16, down on the previous year, when 52.6 per cent of staff had a flu jab. The vaccination is available free to all NHS employees.

Picadeo LLC/Alamy

Welsh audit shows improved access to physios for stroke



The proportion of people seen by a physiotherapist within 72 hours of a stroke has risen from 92 per cent to 96 per cent over the past three years, says the Welsh government.

Its third national stroke survey says 89 per cent of stroke patients were assessed as requiring physiotherapy and that they received treatment on average for 30 minutes per day.

In 2005 more than 3,000 people died from a stroke in Wales, says the report. By 2014 it had fallen by 26 per cent to 2,317 – a reduction of 841 deaths.

Philippa Ford, the CSP's public affairs and policy manager for Wales, said it was encouraging to see the improvement in physiotherapy provision identified by the latest audit.

'The fact that there is a regular audit means that the spotlight will fall on stroke services regularly and keep them high on the political agenda,' she said.

■ Gill Hitchcock

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Physiotherapy is a positive career choice

The event highlighted that physiotherapy is a positive career choice for people from all walks of life, said Cailean Gallagher, a CSP employment relations and union services (ERUS) organiser.

'I think what surprised and inspired me was the range of backgrounds from which the students were drawn,' he told *Frontline*.

'I had quite a few conversations with students who had been teachers, civil servants and even a fire fighter who was a trade union rep in France.'

Talking with delegates over the weekend, Mr Gallagher found they were excited about entering the workforce but felt that too much paperwork or poor management could hamper their ability to grow their skills.

He said students' views about axing bursaries for physio students were mixed, but they felt strongly that every student member needed to feel their voice was heard in the CSP.

'There was real confidence in the CSP's student executive committee in doing quite a hard job of making sure everybody's views are collected, right across the country, and that they are fed properly into the CSP's decision-making processes,' he said.

'The other exciting thing about the whole weekend was that students are keen to get involved and understand how the CSP works, how to influence it, how to get themselves organised into a strong voice.'

Technology is our future

Students with an idea for an app to treat children with cystic fibrosis won the votes of their peers in a competition about improving physiotherapy by using technology.

The group was one of several taking part in an impromptu Dragon's Den-style competition where the reps explored innovations in technology and how these might affect or disrupt the physio profession.

The competition was hosted by Rachael and Tony Lowe, the founders of website Physiopedia.

Ms Lowe told the more than 100 reps that the physiotherapy profession was resistant to change. Physios took years to respond to innovations and that was threatening the profession, she warned.

'We need to be more proactive, embrace change and move the profession forwards before others do it for us,' she said.

'To do this we need to be brave and explore, to seek out opportunities and not be afraid of change.'

The session she and her co-founder delivered was designed to encourage the students to embrace change and come up with ideas that might make a difference.

Other brainwaves included an auto-inflating device to protect people against injuries from falls. The innovators said the estimated £3,000 cost for each device would be offset by savings to the NHS on other services.

Another group planned an electro-charging exercise machine. Their concept was to tackle obesity by encouraging physical activity with exercise machines in public places. But the exercise machines would have a dual purpose – they could charge users' phones and other electronic devices.

Get universities moving

Physio students come from all walks of life



The CSP student executive committee wants its reps to start planning events, based on the CSP's Workout at Work Day concept that will get people exercising at their universities.

The reps were asked to come up with ideas for activities in the last week in April – anything from encouraging people to use the stairs instead of the lift, to organising yoga or Zumba sessions.

Becca Knowles, a CSP student executive committee member, said the idea was not only to get students and university staff moving, but to showcase physio students' skills.



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Innovations from students included apps and a falls prevention device

Herts uni student wins overseas placement prize

Jonathan Burridge, a first year student at the University of Hertfordshire, won this year's prize draw for a one-month elective placement overseas. The CSP award, offered in conjunction with Work the World and open to all CSP student members, will enable Mr Burridge to choose one country out of Tanzania, Ghana, Sri Lanka, Peru, Nepal or the Philippines for his work experience.

— this April

The programme has yet to be named, but one idea was Seven Days without Exercise Makes One Weak.

The long-term goal was to include everyone from pre-school organisations through to universities, said Ms Knowles.

'We want to give you a framework and then we want you guys to run with it and make it what you will,' she told the student reps.

'We will be sending out more details closer to the time, but want to take this opportunity to make you aware of it and start getting your thinking caps on about how you can engage your university.'

Now is the time for physios to improve public health

The time is 'absolutely right' for allied health professionals (AHPs) to get involved in public health, Linda Hindle, the lead AHP at Public Health England, told delegates.

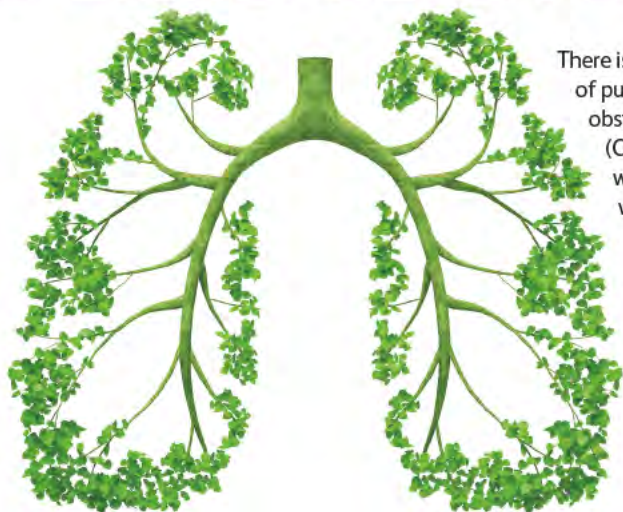
She said the Health and Care Professions Council's updated code of conduct for physiotherapists promoted health and wellbeing as one of the standards it expects from the profession.

And there had been a policy shift towards prevention, as identified by NHS England's Five Year Forward View.

Ms Hindle said she was delighted at the stream of talks and events devoted to public health at last October's Physiotherapy UK event. She told students that this represented an 'incredible' shift in a very short period of time.



Mass of evidence backs CO



There is now so much evidence in favour of pulmonary rehabilitation for chronic obstructive pulmonary disease (COPD) that research comparing it with usual care alone is no longer warranted, an independent review concluded.

'Pulmonary rehabilitation relieves dyspnoea and fatigue, improves emotional function and enhances the sense of control that individuals have over their condition. These improvements are moderately large and clinically significant,'

say researchers in the Cochrane airways group.

Bernard McCarthy, of the National University of Ireland Galway, and colleagues reviewed 65 randomised controlled trials (RCTs) including 3,822 patients.

'As the care of patients with COPD is largely concerned with treating symptoms, we believe that health-related quality of life should be considered as the primary outcome,' they say.

All the studies they reviewed compared pulmonary rehabilitation with conventional treatment, in which patients are only given medicine and health advice.

The rehab programmes involved four weeks or more of aerobic exercise training, with or

Gaming fun is good for children

Active video games can be not only safe but helpful for children with mild-to-moderate asthma, Brazilian researchers have found.

Aerobic exercise has been shown to improve children's exercise capacity and reduce airway inflammation.

'However, the treatment of a chronic disease that involves continual physical training can be discouraging,' say Evelim Gomes, of Nove de Julho University in São Paulo, and colleagues.

'This seems especially important for children, since better performance and greater energy expenditure require an intrinsic motivation for physical activity.'

The team assessed 36 children on factors including lung function, exercise capacity, pulmonary inflammation (measured by exhaled nitric oxide levels) and control of their symptoms.

The children were then randomly allocated into two groups and did supervised exercise in twice-weekly sessions for eight weeks. After a five-minute warmup, the children exercised for half an hour and ended with a five-minute cooldown.

One group played Kinect/Reflex Ridge, an interactive video game requiring full body movement,





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PD rehabilitation

without education and/or psychological support. Programmes were excluded from the review if their exercise component was less aerobically demanding, such as respiratory muscle training, breathing exercises, t'ai chi or yoga.

Participants in 41 of the programmes were inpatients or outpatients at hospitals. Another 23 took place at community centres or participants' own homes, and one included components in a hospital and in the community. Most of the programmes lasted eight or 12 weeks.

Results strongly supported pulmonary rehabilitation programmes, including at least four weeks of exercise training, as part of the treatment for people with COPD, say the authors.

'It is our opinion that additional RCTs comparing pulmonary rehabilitation and conventional care in COPD are not warranted,' they conclude.

'Future research studies should focus on identifying which components of pulmonary rehabilitation are essential, its ideal length and location, the degree of supervision and intensity of training required and how long treatment effects persist,' they advise.

McCarthy B *et al.* Pulmonary rehabilitation for chronic obstructive pulmonary disease, *Cochrane Database of Systematic Reviews* 2015; <http://dx.doi.org/10.1002/14651858.CD003793.pub3> - open access

Comments & conclusions

■ Airway clearance techniques seem to be safe for patients with bronchiectasis, a condition in which abnormally widened airways become clogged with mucus, say Cochrane reviewers. But they found too little evidence to assess any benefits from the practice. Lee AL *et al.* *Cochrane Database of Systematic Reviews* 2015; <http://dx.doi.org/10.1002/14651858.CD008351.pub3> - open access

■ Eccentric exercise, in which the muscle contracts under load, is safe and beneficial for adults with chronic cardiorespiratory disease, say researchers who reviewed 10 studies. The results were at least comparable with traditional exercise in improving strength. Ellis R *et al.* *Clinical Rehabilitation* 2015; <http://dx.doi.org/10.1177/0269215515574783>

n with asthma

while the other group exercised on treadmills. The video gamers exercised at higher intensity with brief rests, similar to interval training, while the treadmill group did continuous exercise.

'Active video games seem to be an interesting exercise for asthmatic children and are probably more attractive to the pediatric population,' say the authors, noting that the gamers achieved higher energy expenditure than those on the treadmill.

In both groups, participants were monitored and assessed during every session, increasing their exercise intensity as they gained fitness. As the video gamers advanced to higher levels, they did more jumps, squats, lateral movements and arm movements.

Both groups made improvements in exercise capacity and asthma control, without ill effects.

'The present findings strongly suggest that the aerobic training promoted by an active video game has a positive impact on children with asthma in terms of clinical control, improvement in their exercise capacity and a reduction in pulmonary inflammation,' say the authors.

However, they add, other recent research has found that active video games don't necessarily increase children's physical activity levels.

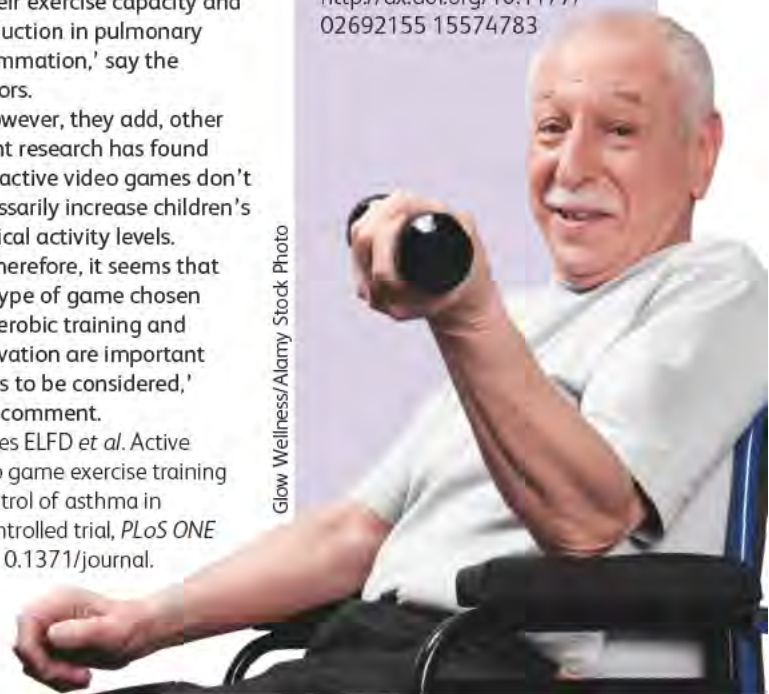
'Therefore, it seems that the type of game chosen for aerobic training and motivation are important issues to be considered,' they comment.

Gomes ELFD *et al.* Active video game exercise training

improves the clinical control of asthma in children: randomized controlled trial, *PLoS ONE* 2015; <http://dx.doi.org/10.1371/journal>

'Active video games seem to be an interesting exercise for asthmatic children and are probably more attractive to the pediatric population'
Evelim Gomes

Glow Wellness/Alamy Stock Photo



Views & Opinions

Setting the standard



We published our revised standards of conduct, performance and ethics last month. These set out what is expected of you, or me, as a Health and Care Professions Council (HCPC) registrant. Earlier versions provided guidance to me as I progressed in my career as a physiotherapist, and also helped me as an educator in articulating these expectations to students as they prepared to embark on their chosen profession.

The standards are just as important to the HCPC as a

regulator. They help us to determine suitability of character for individuals who apply to our register, and in cases where concerns are raised about a registrant's fitness to practise.

I chaired the working group – called a professional liaison group (PLG) – that helped to revise the standards. I was impressed by the thoroughness of the process, particularly in terms of the gathering of evidence to inform any changes and the level of stakeholder engagement. The PLG included service users, carers, professional bodies, employers and registrants as members.

The process began with a number of commissioned projects capturing the views of a wide

range of stakeholders. This included workshops with different groups of service users and carers; focus groups and interviews with registrants and employers; and discussion with fitness to practise (FtP) panel chairs.

The PLG then reviewed the evidence gathered, debated issues and suggested changes to the previous standards. This led to the development of a robust set of draft standards, which went out for public consultation UK-wide. The consultation elicited 217 responses from stakeholders including individual health and care professionals, professional bodies, employers and educators. In addition, we benefited enormously from the views of service users and carers.

Action on sugar

Jenny Rosborough argues that the government

It's no secret that obesity and type 2 diabetes is crippling our health and the NHS, but what is being done? Nearly one child in three is classed as either overweight or obese from the age of two to 15, while 58 and 65 per cent of women and men fall into this category respectively¹. Obesity is extremely complex and there are many contributing factors.

Last year, the recommendation for free sugars' consumption halved to no more than five per cent of our daily energy intake. We are currently consuming from

two to three times more free sugars than recommended and a comprehensive review of the evidence shows that excess sugar consumption is associated with a greater risk of tooth decay and, in particular, sugars-sweetened beverages (SSB) results in greater weight gain in children and adolescents compared to low calorie drinks and is associated with type 2 diabetes².

Action on Sugar's recent study³ showed that a 40 per cent reduction in free sugars added to SSBs over five years would result in an average reduction

in energy intake of 38 kcal per day by the end of the fifth year. This would lead to a reduction in overweight and obese adults by approximately half a million and 1 million respectively and in turn prevent from 274,000 to 309,000 obesity-related type 2 diabetes over the next two decades.

Prime minister David Cameron is now deciding what action the government will take to prevent

childhood obesity. Action on Sugar, a campaign group that works with the food and drink industry, government and other health organisations, has developed a coherent, evidence-based strategy calling for six key actions, which includes reducing the amount of sugar and saturated fat in foods and drinks, stopping promotions of unhealthy food and drink,

65%
of men and 58%
of women are classed
as overweight
or obese



Something to add?

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Elaine Buckley explains why the HCPC's revised standards of conduct, performance and ethics matter to healthcare professionals and patients alike

The key changes from the previous version of the standards include a standard about reporting and escalating concerns about the safety and wellbeing of service users. There is also a standard about being open and honest when things go wrong: individuals are expected to tell service users and carers when they become aware that something has gone wrong with the care, treatment or other services that they provide and to take action to put matters right wherever possible. They are also required to consider making an apology and to make sure that the service user receives an explanation of what happened.

It was vital to refresh the standards so that they remained relevant for all

the 16 professional groups that we regulate. Our registrants work across a range of settings: in the private sector, NHS and in local authorities, for example. This meant that the PLG's discussions focused as much on format, as on content.

We hope the new concise layout will ensure ease of understanding for our registrants, and for service users and carers. Despite the new 'look' of the standards, registrants can be assured that the content remains consistent.

Elaine Buckley is chair, HCPC

More information
<http://bit.ly/1PkKQfP>



Adviceline

Beware of the impact of unconscious bias, warns Jess Belmonte

Why are black and minority ethnic (BME) staff twice as likely as white staff to be disciplined at work? Why are nine chief executive officers in 10 above average height? Although the answers to these questions are complex they contain an element of unconscious bias.

Unconscious bias refers to the prejudices we all have which are not in our conscious control. These biases occur automatically, triggered by our brain making quick judgments and assessments of people and situations based on our background, environment and 'archived' life experiences. A great deal of the unconscious decisions we make are essential to get through the day. If we had to think consciously about every single action we'd barely make it out of bed in the morning!

However, unconscious bias against a particular group, for example when ethnicity, gender or social class are involved, can lead to bad decisions in the workplace and can impact negatively on recruitment, performance and patient care.

Recent figures show that white applicants are more than three times more likely to be shortlisted for an NHS job than BME candidates. A pattern of recruitment of similar 'people like us' can lead to limited diversity of thought, decisions being made without alternative points of view and can impact negatively on patient care.

So what can we do to limit the impact of unconscious bias?

- An awareness of the presence of unconscious bias in itself can trigger you to check important decisions to ensure they were not influenced by assumptions.
- Ensure your colleagues and team are aware of the presence and impact of unconscious bias. Consider undertaking training or complete an online assessment and have an open discussion.
- Acknowledge your own prejudices even if it is uncomfortable and seek out situations and people to challenge them.
- Challenge others and be prepared to be challenged yourself.

Jess Belmonte is a CSP national officer, equality and research

ent must take radical action to cut our intake of sugars

preventing marketing of unhealthy food and drink to children and adolescents and a 20 per cent duty on all sugar-sweetened soft drinks and confectionary. For the full plan, visit www.actiononsugar.org

The proposed strategy offers a win-win for consumers, policy makers, the health service and also the manufacturers. It is just a matter of whether Mr Cameron is willing to implement these policies.

References

¹ Health Survey for England

2014: Health, Social Care and lifestyles

² Scientific Advisory Committee on Nutrition. Carbohydrates and health. 2015

³ Ma, Yuan *et al.* 2016.

Gradual reduction of sugar in soft drinks without substitution as a strategy to reduce overweight, obesity, and type 2 diabetes: a modelling study. The Lancet Diabetes & Endocrinology

Jenny Rosborough is a registered nutritionist and campaign manager, Action on Sugar

Staff Wellbeing

Women in black:
staff enjoy
getting active



Charles Milligan



More than
200
people took part
in the trust's
Health &
Wellbeing
Day

Physiotherapists based at the edge of London's East End use a collaborative approach to improve staff health and wellbeing, as **Robert Millett** discovered

A physiotherapist is improving the health of colleagues at her trust by collaborating with other disciplines and forging community links. Anna Young is a specialist bariatric physiotherapist at Homerton Hospital, part of Homerton University Hospital NHS Trust, in Hackney, east London.

In her main role, she supports patients who are preparing for, and recovering from, bariatric surgery. But alongside her day-to-day duties, Ms Young also acts as a healthy workplace champion and leads an innovative, multidisciplinary group that strives to increase the health and wellbeing of staff.

Ms Young explains that the trust employs almost 4,000 staff, working at the main hospital site and more than 70 community locations. There are no dedicated health and wellbeing staff and no allocated budget for promoting staff health, she says. Yet, despite these limitations, the trust managed to obtain an Achievement award from the London Healthy Workplace Charter last March and it gained the charter's Excellence award last month.

The origins of this success story lie in 2013 when Ms Young volunteered to join the hospital's Move for Health team. Shortly afterwards, she became the lead for health and wellbeing events at the trust. 'I took on a small group of volunteer physios who held annual Workout at Work days and occasional health stalls,' she says. 'They help organise all our events, willingly give up their lunch times and spare time to make posters, contact people and do whatever's needed.'

Eastern promise

Staff Wellbeing



Dynamic duo: Margaret Bingham-Crisp (left) and Anna Young

Ms Young enlisted the help of the trust's communication team to promote activities through the staff magazine, and set up an intranet page and Twitter account. In addition, soon after taking on the role Ms Young teamed up with the trust's staff experience lead Margaret Bingham-Crisp. 'Margaret was doing a lot around staff benefits so I asked "Why don't we combine our forces and come up with some new ideas?"' she explains.

Combined efforts

Ms Young and Mrs Bingham-Crisp organised the trust's inaugural health and wellbeing day and invited a range of departments and health professionals to take part. 'The cardiology team, dieticians, stop smoking service and library team all participated,' says Ms Young. 'And we invited local

community health services, the council and their public health team, representatives from local leisure centres, the library, a local gardening scheme and a social enterprise cafe.'

Stands provided information on topics such as physical activity, local exercise classes, healthy eating, smoking cessation and weight loss. Staff received free health checks and taster sessions of massage, reflexology, Zumba dancing and Pilates. 'We managed to get more than 200 members of staff to come,' says Ms Young. 'And because we had combined forces it wasn't seen as just a physio thing – using all the health promotion resources at the Homerton helped us to reach out to all the different staff groups.'

Following the successful event Ms Young and Mrs Bingham-Crisp invited more collaborators to join them and established the Healthy Homerton core group. Group members include a non-executive director, an associate director of workforce as well as staff members from departments such as catering, communications, facilities, dietetics and physiotherapy.

Since being formed, the group has organised a range of events for staff: wellbeing, exercise and mindfulness sessions as well as Schwartz rounds (evidence-based forums where staff discuss some of the emotional and social challenges of caring for patients and offer mutual support). Members have also lobbied successfully for their health and wellbeing agenda to be prioritised in the trust's annual quality account for 2015-16. And Healthy Homerton has now been recognised as being a key part of the trust's staff benefits 'brand'.

Improvements have also been triggered by the group's successful bid to gain the London Healthy Workplace Charter award, says Mrs Bingham-Crisp. 'The charter helped us see where the gaps were,' says Ms Young. 'Mental health and substance abuse were probably our two weakest areas – so it was great to identify that. As a result, our employee health department is now supporting and writing up a new mental health policy, new guidelines and a great referral pathway.'

The group has met a local community group focusing on alcohol awareness and liaised with substance abuse organisations. 'We are also setting up meetings with a training provider so that we can get 16 managers and team leaders trained as mental health first aiders,' says Mrs Bingham-Crisp.

Help at hand

Jocelyn Walder, an infant feeding specialist midwife, will have clocked up 30 years at the Homerton by 2017. Eight years ago she developed acute disseminated encephalomyelitis (an autoimmune disease), and became paralysed from the neck down. After six months in hospital she returned to work in a wheelchair and unable to stand.

The Healthy Homerton team helped Ms

Walder with exercises and made her aware of community services she could access.

'That's the most important thing of all – just knowing,' she says. 'Because there are little pockets of services out there, but if you don't know exactly what's available then you can't access them.'

Ms Walder became involved with Ability Bow, a specialised gym. 'The instructors are

all specially trained and the equipment is designed for people with disabilities,' she explains. Ms Walder is now able to use a Zimmer frame and her speed of movement and fluency continues to improve. 'I'm very lucky that work has continued to support me with flexibility for hospital appointments, and I've been able to adjust work hours to make exercising possible.'



Something to add?

email *Frontline* at
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Step challenge

Last year the team organised a six-week step challenge, involving 34 staff teams. 'More than 200 people signed up and I think the appeal was that people realised it was very simple,' says Mrs Bingham-Crisp. 'People could just make small changes to get involved, by getting off the bus a stop early or by just going for a walk at the weekend, for example.'

The winning team's prize was taking part in an experience day at the Lee Valley Lee Valley White Water Centre (pictured right) in Waltham Cross, Hertfordshire, which Ms Young arranged.

'I talked them into offering a few experiences for our winners – and as a thank you we said we would promote their services around our trust,' she says.



Making every contact count

The team follows up every event with questionnaires and receives feedback from the national annual staff survey reports. 'The survey shows that since the Healthy Homerton group started there has been a significant move towards more people saying "Yes, the trust does look after my health and wellbeing",' explains Mrs Bingham-Crisp. 'We also get feedback from staff directly,' says Ms Young. 'People come to us at events and say "You measured my body mass index last time and afterwards I started going to the gym, I changed my diet and now I've lost weight" so it's really encouraging to hear those stories.'

Ms Young believes other physios who are interested in spearheading similar initiatives in their workplaces should just 'go for it'. 'Don't be afraid to just get going with ideas,' she says. 'Get as many people helping you as possible. There are probably other departments running education or information sessions for services users, so join forces and arrange for the information to be available for staff as well.'

One tip is make the most of resources and free public health information. 'Get in contact with local public health teams as they have all the information about health and wellbeing services in your area,' she says. The Healthy Homerton group hopes to extend its approach into the national 'making every contact count' agenda, to benefit staff and patients.

'If you are giving your patient a few exercises to do then why not address some of their other health issues as well, by signposting them to local services,' says Ms Young. Ultimately, the group hopes to gather evidence that demonstrates that improving staff health directly benefits patients. 'It's common sense, really,' says Ms Young.

'If you want to provide a good service and care for patients then you need your staff to be healthy.' **FL**

More information

The Association of Chartered Physiotherapists in Occupational Health and Ergonomics.

A CSP professional network www.acpohe.org.uk

CSP: Fit Enough for Patients? An audit of workplace health and wellbeing services

for NHS staff www.csp.org.uk/node/398452

NHS Employers: The way to health and wellbeing <http://bit.ly/1SSYpsX>

NHS Employers: Health and wellbeing resource library <http://bit.ly/1Q6xIef>

NICE guidelines Behaviour Change: General approaches: www.nice.org.uk/guidance/PH6

NHS Health at Work Network www.nhshealthatwork.co.uk

CIPD: Health, Safety and Wellbeing resources <http://bit.ly/1VBPMki>

HCPC Audit

In the second in a series of articles on preparing the HCPC CPD audit, CSP professional adviser **Gwyn Owen** looks at how we become proficient in something



Jack Sullivan/Alamy

Learning from experience

I've just received the reminder to renew my HCPC registration for another two years www.hcpc-uk.org/registrants/renew As I worked through the prompts on the renewal form I was reminded of my professional responsibility for learning, and of how learning is integral to the development of my physiotherapy practice.

The relationship between learning, practice and development is described in the CSP code www.csp.org.uk/code Section 4 of the code calls on members to strive to achieve excellence – through

a process of continual development; demonstrating innovation and leadership; and supporting others' learning and development, and the development of physiotherapy.

Over the next few months, the continuing professional development (CPD) series will be exploring process of learning from: experience; events; and helping others learn and develop. The final piece in the set of four will unpack how learning from experience supports lateral career moves. The information, ideas and resources presented by these pieces will help you recognise

and evaluate the learning that happens in practice, and evidence the value and impact of that learning as your career unfolds.

What is learning?

Learning is hard work! Definitions of 'learning' (and there are many) describe a process of development that produces a change – in values, behaviours, knowledge or skills. Learning is therefore both a process (the steps I go through to produce a change) and an outcome (the end result of that change).



Time to renew

From 1 Feb to 30 Apr you will need to renew your registration

www.hcpc-uk.org



CPD resources

Follow the links to open a sample of CPD resources from CSP's website that will help you make the most of the learning opportunities as part of your day-to-day practice

■ **Being a Leader: Leadership and CPD** www.csp.org.uk/node/858816 The first in a set of four articles that will help you think critically about how to use your day-to-day experiences to develop and evidence your capacity for leadership

■ **All change: first steps in a new career** www.csp.org.uk/node/817565

Structured guidance to help you prepare to learn from the experience of moving into a new role.

■ **Learning from our mistakes** www.csp.org.uk/node/817565 Unpack the process of learning from mistakes and use the activity to record your learning from a positive experience

■ **Could your children help you work?** www.csp.org.uk/node/358224 Explore how the behaviours, knowledge and skills developed through experience of being a parent/carer transfer into the workplace

■ **CPD Habits series** <http://bit.ly/1BAnm2M> Use CPD Habit 03 to find out more about reflective practice; and CPD Habit 06 to make the most of opportunities to learn from experience that sit as part of your day-to-day practice

criteria in mind to define 'a successful performance' – descriptors that you, your critical friend or an external assessor would have used to evaluate and give feedback on your performance. This evaluation and feedback would have helped you become more aware of your strengths and areas of your performance that needed more work.

As your confidence and proficiency developed through a process of practice and reflection, you may have been asked to share your learning with others – through informal peer reflection or a formal teaching session perhaps. And the experience of being asked to help someone else learn might have boosted your confidence and created a fresh momentum to polish your practice and a space to gain feedback on your performance. (There will be more on feedback and learning through helping someone else later in the series).

Influencing factors

Go back to your experience of becoming 'good' at something ... but this time shift your focus away from the steps you went through to think about the things that influenced your learning.

The literature suggests that there are many different factors work together to influence the process and outcome of learning from experience. Some factors are specific to the learner – their motivation for learning, readiness to learn, and capacity for the emotional/cognitive/psychomotor work associated with learning and change. Other factors relate to the learning environment – the resources available to support learning, the physical qualities of the learning space and so on. And then there's the learning process itself – from the design of the learning activity to its evaluation (more on how these factors shape the learning process and outcome later in the series).

Learning from experience, professional practice and development

Physiotherapy practice – the things the physiotherapy workforce can do, the people it works with and how its work is organised is not static, but evolves in response to developments in research, technology and evidence, and changing healthcare needs. Developments in practice create opportunities (and a need for) learning; while the process of learning from experience has the potential to generate new understanding and insights that support the ongoing development of practice. And so the process of achieving excellence described in Section 4 of the CSP's code continues.^{FL}

organisational policy that leads me to learn a specific fire drill for example). Because it generates change, learning involves emotional and cognitive work, and depending on what is being learnt (such as a new dance move or a physiotherapeutic technique) may also involve psychomotor work.

Learning from experience

Think about something you're 'good' at. It could be something you are or do as part of your physiotherapy practice, or something that sits with life outside the profession. Make a note of the behaviours, knowledge and skills associated with the practice and how you got to be good at it.

The process of becoming good at something is ongoing. A dynamic cycle of action and reflection; active experimentation; and making mistakes and celebrating (a growing number of) successful performances as your practice became more proficient. It's likely that you would have had some

rience

If you think about your own experience of being a learner, you'll know that learning can produce a temporary change (memorising the detail of something for just long enough to pass a test for example), or may generate something more permanent (the ongoing process of developing and refining your professional identity and scope of practice as a physiotherapist, physiotherapy student or support worker).

Learning can be driven from within (a drive for personal development for example) or may be the result of an external driver (such as an

RespiratoryCare

Take a bre

Rehabilitation can get patients with lung disease back in action and enjoying life.

Janet Wright looks at the options

Air apparent:
the case for
pulmonary rehab
is now proven



Want to know more about respiratory physio?

Visit the website of the Association of Chartered Physiotherapists in Respiratory Care www.acprc.org.uk



ather

There are now
230
Breathe Easy groups
in the UK, providing
companionship
and support

When a patient says you've given them their life back, you know you're doing something right. This is what physiotherapist Ruth Barlow loves about pulmonary rehabilitation (PR) for patients with chronic obstructive pulmonary disease (COPD).

'With chronic conditions, people cannot be cured, so it is easy to feel nothing can be done. When patients attend rehab they become fitter, more able to do their activities of daily living, more able to self-manage,' says Ms Barlow, who is pulmonary rehab lead with Provide Community Interest Company, a social enterprise delivering health and care services.

Researchers are no longer even asking if PR works better than usual care for people with COPD. The case has been conclusively made, according to an independent Cochrane review (see Physio Findings, page 18). In just a few weeks, patients can become fitter and less fatigued, walk farther, breathe more easily and, importantly, feel more in control of their symptoms than before.

Programmes vary in length and content. But the basis is at least four weeks' regular aerobic exercise sessions, under the care of a specialist trainer.

Ms Barlow runs PR in a dozen venues in different parts of Cambridgeshire and Essex. Patients are encouraged to attend twice a week for seven or eight weeks. They are assessed at the beginning and end of the programme, with a walking test and quality of life scale among other outcome measures.

'You feel a great satisfaction when people reach a goal, such as walking to the local shop,' says Ms Barlow. 'One patient told me that after rehab she had the confidence to go out – she just needed that support to see that she could be more mobile. She said she felt she had her life back.'

Underused treatment

The National Institute for Health and Care Excellence (NICE) calls for PR to be made available, and easily accessible, 'to all appropriate people with COPD'.

Respiratory Care

Guidelines produced by the British Thoracic Society (BTS), accredited by NICE, state that PR should be offered with a view to improving exercise capacity, breathlessness, health status and psychological wellbeing (Bolton CE *et al. Thorax* 2013; doi:10.1136/thoraxjnl-2013-203808).

Yet the Cochrane researchers noted that PR 'has long been underused in patients with COPD'. Why is such a valuable treatment not available for all those who need it?

'It depends whether commissioners want to pay for this service,' says Helen Jefford, specialist physio and PR lead on the COPD team at Greenwich Community Health Services in south east London, part of Oxleas NHS Trust.

Both provision and quality of PR vary around the country, she says. 'We've got minimum standards across the country so we should be following these. But people aren't always getting the basics right. There's huge variance across the country depending on resources, experience of the team, what commissioners are prepared to pay for.'

Mrs Jefford's one of an 18-strong specialist team in Greenwich, which has invested heavily in pulmonary rehabilitation. In contrast, she says, some other areas farm their services out to private companies that run them on a shoestring budget with hardly any staff.

'It drives me mad,' she says, 'because we know that PR works and it's evidence-based.' Even in areas with reasonable PR provision, she says, many patients aren't being referred. Sometimes this is because healthcare professionals don't know what is available.

That's something the British Lung Foundation (BLF) has addressed. It has developed a wallet-sized 'COPD passport', a 10-point plan to help patients to engage with GPs and healthcare professionals. However, not all patients take up a referral, and COPD symptoms such as breathlessness may deter some.

This is something Ruth Barlow addresses before anxious patients start a course. 'I explain that I know patients often are fearful of their breathlessness and that they will be treated as an individual, with the exercises tailored to their needs,' says Ms Barlow. 'Some patients find visiting the class helps, others want to talk to people who have attended the classes. So I try and arrange what suits each one.'

She has also introduced cognitive behaviour therapy to her classes to help patients cope and make the changes they need. PR programmes should supporting people in behavioural change, Mrs Jefford agrees, for example helping them set goals. 'Behavioural change is a tricky thing,' she admits.

Then there's the question of encouraging patients to stay with the programme even when they're not feeling up to it. Fatigue is a common effect of COPD, along with frequent debilitating infections. 'It's difficult for patients to stay motivated when they're unwell so often,' says Mrs Jefford. 'We're lucky here in Greenwich, we're part of a team so nurses look after people when they're unwell. Then they come to us when they're well enough for rehab.'

'One patient told me that after rehab she had the confidence to go out – she just needed that support to see that she could be more mobile. She said she felt she had her life back'
Ruth Barlow

Taking the next step

The BTS guideline recommends: 'Patients graduating from a pulmonary rehabilitation programme should be provided with opportunities for physical exercise beyond their rehabilitation programme' and encouraged to continue exercising.

Ms Barlow offers her patients a choice of options for exercising in the community. 'We access the different exercise groups, such as walking groups, and in some areas there are follow-on classes for patients who have attended pulmonary rehab,' she says. 'In Mid Essex we can directly refer to the health trainers who have a good knowledge of all the activities available to patients and they work closely with our team.'

However, says Mrs Jefford, the chance of follow-up care depends very much on where you are. Her patients can use sports and leisure centres run by the non-profit Greenwich Leisure Ltd.

'There's a lovely menu of choices for people who come to us,' she says. 'But not every PR provider has anywhere for patients to go on to. We know what best practice is, but what's available is a postcode lottery.'

That's where the BLF's Breathe Easy groups come in, as the emphasis in health education shifts from set exercise to an increase in everyday activity. Having an invisible disability deters many COPD patients from socialising or taking part in physical activities. In a Breathe Easy group, everyone's in the same boat.

Run by members with back-up from the BLF when needed, there are now 230 Breathe Easy groups in the UK, providing companionship and psychological support. Monthly meetings include talks, health advice, activities or outings. New members are welcome: find out more from the BLF.

'People with COPD often feel very socially isolated, so Breathe Easy groups are a fabulous place to signpost people to,' says Mrs Jefford. 'We're really pressing not just exercise but physical activity, and Breathe Easy plays a vital role encouraging people to be active.' **FL**

• See also page 66

Resources

- British Lung Foundation: www.blf.org.uk
73-75 Goswell Road, London EC1V 7E.
Tel: BLF Direct 03000 030555
- Breathe Easy groups:
www.blf.org.uk/BreatheEasy
- COPD Passport: <http://passport.blf.org.uk>
- NICE guidelines: <http://bit.ly/1nHzNa5>
- British Thoracic Society guideline:
<http://bit.ly/1P8AuQ3>
- Guidelines and quality standards:
<http://bit.ly/1SwpxpS>

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InPerson

Planning ahead

Getting the physio student numbers right is vital if healthcare provision is to match the future needs of patients in the UK says CSP chief executive Karen Middleton

We all know how important it is to have an appropriate number of physio staff on duty to run a good quality service for our patients. But it's not something that happens by magic. It needs to be properly planned for, often as much as a decade in advance. It also needs vision, an understanding of epidemiological factors and a grasp of the way our profession may need to adapt to meet future need.

That's why the CSP has taken a lead on this crucial workforce planning issue. Council has identified the need for an adequate, properly trained workforce as one of CSP's key strategic priorities. In particular it's taken a lead in calling for 500 more physios to be trained a year by 2019 to meet growing demand.

It's a tall order in the current climate. Over the last six months, we've seen too few physios in some areas, increased demand for more physiotherapy posts and increasing need for our services as the population grows older. All this against a backdrop of reducing the money for training, pre- and post-registration.

There are other operational issues too: downbanding, limits on the use of agency staff, terms and conditions under threat ... I am sure you can add to the list. But, as a leader of the profession, the CSP wants to give a vision of what we should aspire to – despite the threats.

Last summer, for instance, we became aware that the Westminster government might remove the student bursaries for physiotherapists and other health care practitioners. The government wanted to switch to the system used to fund all other degrees: tuition fees and student loans.

Then, on 23 December 2015, Health Education England announced a cut in NHS-commissioned physiotherapy student places for 2016/17 of 6.7 per cent. That's 104 fewer training places.

The emerging picture is a complex one. We have, through the CSP committees, networks, e-bulletins and *Frontline*, kept members abreast of

what is happening. We also facilitated a debate about the student bursary issue at our PUK conference in October. See www.csp.org.uk/education-student-funding-england

The CSP Council then debated the bursary issue at its meeting in December, having listened to all the arguments and issues from members who had engaged in the debate.

The priority for Council was to ensure the future

viability of the profession and consider what path was likely to increase numbers.

It decided that the proper funding, unpalatable though it was, was more student places. But it also gave people from all walks of life a chance to study to be a physio.

There is no doubt that it is the role of leadership but leadership is all about making decisions – weighing up the pros and cons and the likely implications (knowing full well that the unpopular choice will be popular for all).

Whatever work is done to ensure the profession's influence at national level, the balance of need and demand is crucial.

The CSP staff can produce the Workforce Modelling Tool project supply and demand for the physio workforce until 2030 (www.csp.org.uk/professional-union/practice-workforce-data-mode)

As a member, you need to demonstrate to local authorities the demand for physiotherapy in your NHS and independent practice.

It is vitally important to have regular conversations with local authorities about the future of healthcare commissioning. If you don't, a decision will be made and demand for training numbers will be data shaped by what our profession has said. We need to inform all of us to inform the future.

While the CSP has a long way to go, we need each other to meet the challenge. If we don't, the profession is in danger of disappearing in another decade.

More crucially, we need to ensure that the health service improves for our patients.



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Networks & networking

Catch up with news and announcements regarding the CSP's work at region and country level and also courses and events from CSP recognised professional networks. All recognised networks may list their events free of charge in this section to a limit of 180 words. Reach out to members, previous colleagues and classmates through the info exchange, retirement groups, or reunions sections. Send the information you wish to include to: networkads@csp.org.uk

Frontline schedule

Issue date	Booking deadline
Mar 2	Feb 15
Mar 16	Feb 29
Apr 13	Mar 29
May 4	Apr 18
May 18	May 3

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Courses & conferences

Advertise your course or conference by contacting our advertising agents, Media Shed on tel: **0845 600 1394** or email: cspads@media-shed.co.uk Send your text and have your lineage advertisement typeset by Media Shed to our magazine house style. Add a box or shading to make your advert stand out on the page. Alternatively you can choose to send your completed display artwork to Media Shed. Call to discuss rates.

Online

Create your course advert online by using our easy to use website. Go to: www.csp.org.uk/courseadverts

Please note The courses and conferences advertised in this section have not been subject to the CSP's formal recognition processes unless explicitly stated. *Frontline* accepts advertisements in good faith and is not responsible for the content of advertised events (except those delivered by the CSP itself). In the event of queries or comments relating to a specific course or conference, please contact the relevant organiser directly. Please see additional *Guidance for Members* in this section on broader issues relating to CPD, competence and scope of practice.

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Recruitment

Advertise your vacancy, agency or service in *Frontline*, or online at www.jobscalator.com by contacting our advertising agents, Media Shed, on tel: **0845 600 1394** or email: cspads@media-shed.co.uk

Send your completed display artwork or contact Media Shed to discuss typesetting options. Alternatively submit your text for our lineage section. Call Media Shed to discuss rates.



Networks & networking

English networks news



English regional networks

News from the CSP English regional networks, branches and country boards.

Find out more at
www.csp.org.uk/nations-regions



The 10 English regional networks organise forums, events or conferences four times a year. These are:

- usually free to all CSP members including associates, students and retired
- great CPD for HCPC re-registration, your development, and developing your services
- a networking and sharing opportunity
- an opportunity to debate and find out what's going on.

Up to date information at: www.csp.org.uk/nations-regions

East of England

Information at: www.csp.org.uk/eastengland

Twitter: @Physioeast

Contact: Chair, Carl Hancock, at: eastofenglandchair@csp.org.uk

Next England regional network AGM

Date: Monday 22 February

Time: 7pm-9.30pm meeting (6.30pm buffet available)

Place: Cambridge Golf and Conference Centre, Cambridge Road, Hemingford Abbots, Huntingdon PE28 9HQ

This is a networking and CPD opportunity. Advice on your HCPC portfolio will be available. Feel free to bring your audit work along with you.

Attendance will enter you into a prize draw for a place at ARC 2016. Please register your interest by emailing: cspadmin.eoe@cspn.net Please register by 12 noon on 19 February to enable catering numbers to be finalised (but please do come along even if you haven't).

East Midlands

Information at: www.csp.org.uk/eastmidlands

Twitter: @CSPEastMidlands

Contact: Chair, Lucy Cocker, at: eastmidlandschair@csp.org.uk

Next regional forum

Date: Monday 7 March

Time: 5pm-7.30pm

Place: Training Room 1, London Road Community Hospital, London Road, Derby DE1 2QY

London

Information at: www.csp.org.uk/london

Twitter: @CSPLondon

Contact: Chair, Carole McCarthy, at: londonchair@csp.org.uk

Regional network evening event – Population data tool and business school for physiotherapists

Date: Monday 15 February

Time: 5.15pm-8.15pm

Place: Citadines, 94-99 High Holborn London WC1V 6LF GB

This is the first in our series of evening events for all qualified and associate CSP members working or living in and around London.

This session hopes to attract London based members to participate, but more positively

we are aiming to attract those who are interested in service development and show them how the tools gained from these talks can help them.

We start with a presentation on the CSP population tool and how members can use this to support their own services, led by Kate Bennett of the CSP. This will be followed by Stuart Paterson who will give a talk on business acumen for physiotherapists. Stuart is a very successful private physiotherapist with his company in the Sunday Times top 100 companies to work for.

The intended outcome of this event will be to use the population data tool for your local population and be more business savvy. Please register via the link: <http://bit.ly/1KslKcY>

Next regional forum

Date: Monday 21 March

Time: 4pm-7pm

Place: Central London venue details to be confirmed.

North East

Information at: www.csp.org.uk/northeast

Twitter: @CSPNorthEast

Contact: Chair, Robert Goddard, at: northeastchair@csp.org.uk

Next regional forum

Date: Thursday 17 March

Time: 11am-3pm

Place: Durham County Cricket Club, Chester le Street, County Durham DH3 3QR

North West

Information at: www.csp.org.uk/northwest

Twitter: @northwestcsp

Contact: Chair, Jo Lishman, at: northwestchair@csp.org.uk

Next regional forum

Date: Monday 7 March

Time: 6pm-8pm (5.30pm for refreshments)

Place: Brooks Building, Manchester Metropolitan University, Manchester M15 5JH

South Central

Information at: www.csp.org.uk/southcentral

Twitter: @CSPsouthcentral

Contact: Chair, Amanda Pike, at: southcentralchair@csp.org.uk

South East Coast**Information at:** www.csp.org.uk/southeastcoast**Twitter:** @CSPSouthEast**Contact:** Chair, Helen Balcombe, at: southeastcoastchair@csp.org.uk**Next regional forum (includes AGM)****Topic:** 'Social media in healthcare' – CPD theme**Date:** Thursday 17 March**Time:** 10am-1pm**Place:** University of Brighton, Room D216, Robert Dodd Building, 49 Darley Road, Eastbourne BN20 7UR**South West****Information at:** www.csp.org.uk/southwest**Twitter:** @CSPsouthwest**Contact:** Chair, Adam Zawadzki, at: southwestchair@csp.org.uk**Next regional forum****Date:** Wednesday 16 March**Time:** 1pm-5pm (lunch 1pm-1.30pm)**Place:** The Oaktree Arena, Bristol Road, Edithmead, Highbridge, Somerset TA9 4HA**West Midlands****Information at:** www.csp.org.uk/westmidlands**Twitter:** @WestMidlandsCSP**Contact:** Chairs, Sheila Stringer and Sam Townsend, at: westmidlandschair@csp.org.uk**Next regional forum (starts with AGM)****Date:** Monday 21 March**Time:** 10am-1pm (sandwich lunch 1pm-1.30pm)**Place:** Room G86, School of Sport Exercise and Rehabilitation Sciences, Birmingham University, Edgbaston, Birmingham B15 2TT**Yorkshire and the Humber****Information at:** www.csp.org.uk/yorksandhumber**Twitter:** @CSPYorkHumber**Contact:** Chairs, Angela Clough and Jean Heseltine, at: yorksandhumberchair@csp.org.uk**Next regional event (includes AGM)****Topic:** Physiotherapy in primary care: 'Making the business case'**Date:** Saturday 5 March**Time:** 10am-3pm**Place:** York St John University, Lord Mayor's Walk, York YO31 7EX**West Surrey branch lecture****'Not just a broken back'... there's the bowel, bladder and image issue too****Speaker:** Carol Barraclough from the Spinal Injuries Association**Date:** Wednesday 2 March at 6pm**Place:** Frimley Park hospital**Cost:** £2, £1 students**Contact:** For further information please contact Caroline Dodds at: caroline.dodds@fhft.nhs.uk Certificate for CPD will be included.**Future dates**

- Wednesday 23 March, (time TBC) – **CSP council meeting**
- From 5 March to 21 March – **quarterly English regional network forums**
- Tuesday 22 March, 10.30am – **regional development event**
- Tuesday 22 March, 4pm-5.15pm – **English network forum.**

Professional networks news**Professional networks**

Courses and events from CSP recognised professional networks. Share your events here free of charge.

Send an email to networkads@csp.org.uk

Association of Chartered Physiotherapists in Neurology (ACPIN) – Wessex**Aquatic physiotherapist for neurological conditions****Date:** Saturday 9 April and Sunday 10 April**Tutor:** Jacqueline Pattman**Place:** Salisbury Spinal Unit, Salisbury District Hospital SP2 8BJ**Cost:** £150 ACPIN members, £200 non-members**Contact:** Email: wessex@acpin.net**Association of Chartered Physiotherapists in Neurology (ACPIN) – Surrey and Borders****Evening lecture – AGM and use of Warrington stroke category****Speaker:** Marriane Gayton**Date:** Wednesday 10 February 7pm for 7.15pm start**Place:** Physiotherapy Dept, Frimley Park Hospital, Frimley**Cost:** Free members, £4 non members

No booking required. Also on iCSP

Contact: surrey@acpin.net**Medico-legal Association of Chartered Physiotherapists (MLACP)****Paediatric and adult neurology – the role of the physiotherapist as an expert witness****Date:** Wednesday 27 April and Thursday 28 April 2016

This two-day course is for experienced physiotherapists working in paediatric or adult neurology who are interested in, or have some experience of, preparing physiotherapy reports for medico-legal purposes.

Place: CSP, 14 Bedford Row, London WC1R 4ED**Course leaders:** Eileen Kinley and Will Winterbotham**Cost:** £300 MLACP members, £340 non-members**Contact:** For more information, contact Eileen Kinley (paediatrics) at: eileen@83waterloo.co.uk or Will Winterbotham (adult) at:willwinterbotham@btinternet.com

Download an application form from:

www.mlacp.org.uk**Acupuncture Association of Chartered Physiotherapists (AAPC)**

Upcoming CPD courses

Upper refresher**Date:** 6 March**Place:** Newcastle**Auricular acupuncture****Date:** 5 March**Place:** Peterborough**Electroacupuncture, Gua Sha and cupping****Date:** 5 April**Place:** Peterborough**Women's health****Date:** 23-24 April**Place:** London**AACP Basic acupuncture foundation courses**

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Place: Derby

Dates: 27, 28 February, 12, 13 March and 7, 8 May

Place: Reading

Cost: £495 – Including one year's full membership of the AACP with many benefits!

To book: Visit www.aacp.org.uk > Find a Training Course > Foundation Courses or CPD Courses
Tel: 01733 390007 Email: sec@aacp.org.uk

AACP Grants

AACP have a number of grants available for AACP members. For more information please contact Mindy Cairns, AACP research advisor, at: research@aacp.org.uk or see the AACP website: www.aacp.org.uk

Physio First

Physio First - March 2016 Central Education Programme. Booking now open – secure your place early to avoid disappointment!

The shoulder: Evidence to support all the latest surgical interventions and post-op rehabilitation

Tutor: Lennard Funk, Puneet Monga and Tanya Mackenzie

Date: Saturday 5 March

Place: Manchester Institute of Health and Performance, Manchester M11 3BS

Musculoskeletal occupational health acupuncture

Tutor: Jon Hobbs

Date: Saturday 5 March

Place: Oxford Brookes University, Jack Straws Lane, Marston Road, Oxford OX3 0FL

Starting in private practice

Tutor: Karen Winrow and Karen Willcock

Date: Friday 11 March

Place: The CSP, London, WC1R 4ED

The myofascial spine: Understanding and integrating myofascial spinal treatment

Tutor: Howard Turner

Date: Saturday 12 March

Place: BH Parkside, Bromsgrove, Worcestershire B61 0AZ

The five phases of knee rehabilitation

Tutor: Mike Antoniadis

Date: Tuesday 8 March

Place: The Hart Leisure Centre, Fleet GU51 5HS

Cost: Prices start from £135

You can book by visiting: www.physiofirst.org.uk and receive a £10 discount, or by calling our events team on tel: 01604 684968, or emailing: education@physiofirst.org.uk

Visit: www.physiofirst.org.uk for full course details and for further courses being held in 2016.

Association of Chartered Physiotherapists in Sports and Exercise Medicine (ACPSEM)

For just £55 per annum full members enjoy the benefits of a strong network of sports physios, three sports journals online, a structured CPD pathway supported by a suite of evidence-based training courses in taping, soft tissue and rehabilitation and discounts with more than 20 companies. Student membership costs £21.

Spring study day – Soft tissues techniques; priming for performance

Date: 23 April

Place: St George's Park, Burton-Upon-Trent
Soft tissue release techniques with hands, tools, belts and bands. Mobilisation of the peripheral nervous system, dry needling and sports taping techniques (rigid and flexible).

Speakers: Chris McNicholl, Lesley McBride, Colin Paterson, Donna Strachan, Chris Norris, Ben Rosenblatt, Leigh Halfteck

Cost: Fees from £80

Clinical reasoning in exercise and performance rehabilitation

Place: Bisham Abbey

Dates: P2 12-13 March

Cost: Fees from £200/weekend

Three days of anatomy prosection for sports physios courses

Place: Vesalius Clinical Skills Centre, University of Bristol

Dates: 14 March – Shoulder and brachial plexus
15 March – Knee and ankle

16 March – Hip and groin

Cost: £150 per day, three days for £400

Autumn study day – Technology in sport and rehabilitation

Place: Cardiff

Date: November date tbc

Contact: Email: info@physiosinsport.org

Web: www.physiosinsport.org

Musculoskeletal Association of Chartered Physiotherapists (MACP)

Know pain: A practical guide for therapeutic neuroscience education

The challenge of successfully managing persistent pain can be one of the most daunting for both clinicians and sufferers. Patients are often frustrated after failed short-term interventions. It is often difficult to understand and explain high and prolonged levels of pain where a traditional tissue based cause is lacking. This course explores a cutting-edge, patient-centred approach using a variety of practical learning methods to help your patients understand their pain. It provides a range of practical

applications and methods to take into your clinic and immediately apply with your patients. The course content blends a wide range of contemporary evidence from both educational and healthcare literature.

Date: 21 and 22 May 2016

Place: Royal London Hospital

Cost: £255 MACP members, £275 non-members

Contact: <https://macpweb.org/home/index.php?p=402>

Association of Chartered Physiotherapists in Reflex Therapy (ACPIRT)

AGM and 'Back to Basics' practical study day

Date: Saturday 5 March

Time: 9am - 4.30pm (hall open from 8.30am)

Place: South Cerney Village Hall, Nr Cirencester GL7 5TU

Practical facilitator: Gunnel Berry

Cost: £50 including lunch for members, £55 non members

Contact: Email: diandboot@aol.com or download form from iCSP.

ACPIRT Reflex therapy foundation course 2016

Four weekends over nine months. Learn to treat the body through reflex points on the feet. Akin to reflexology but with health professional rationale and reasoning to be used in wide variety of patients and health care settings. Endorsed by CSP quality mark, the course is led by experienced teachers and assistants.

Dates: 30-31 January, 20-21 February, 19-20 March and 17-18 September

Place: Village Hall, School Lane, South Cerney, nr Cirencester, Gloucestershire GL7 5TU

Cost: £300 per weekend. 10 per cent off total price when paying in full in advance.

Contact: Gunnel Berry, course coordinator, email: info.acpirtfoundationcourse@gmail.com

Association of Chartered Physiotherapists in Occupational Health and Ergonomics (ACPOHE)

ACPOHE is the CSP professional network for physiotherapists working in occupational health and ergonomics. Registered members of ACPOHE are physiotherapists who have demonstrated specialist competency in the fields of occupational health or ergonomics.

Introduction to occupational health

Date: 9/10/11 March

Place: Peterborough

Cost: £455 member, £515 non-member

Introduction to applied ergonomics

Date: 16-17 April

Place: Edinburgh

Cost: £300 member, £360 non-member

Introduction to occupational health

Date: 21/22/23 September

Place: Edinburgh

Cost: £455 member, £515 non-member

Upper limb disorders in the workplace – Risk assessment and management

Date: 1 October

Place: Guildford

Cost: £140 member, £200 non-member

Introduction to applied ergonomics

Date: 15-16 October

Place: Slough

Cost: £300 members, £360 non-members

ACPOHE courses being hosted by Central Health:

Office ergonomics (DSE) level 1

Date: 5/6 March

Place: Central Health Network, Spondon, Derby

Contact: Jane Fearn on tel: 01332 281411 or email: jane.fearn@centralhealth.org.uk

ACPOHE contact: Information and booking at: <http://www.acpohe.org.uk/events>

ACPOHE administrator, Tracy Long, tel: 01284 748202 email: acpohe@buryphysio.co.uk

Physiotherapy Pain Association (PPA)

Sleep and pain: Managing the interactions

Date: Saturday 19 March 2016

Place: Harrogate District Hospital

One-day course introducing physiotherapists to theory and practice of the cognitive behavioural approach of sleep and pain problems

Tutors: Andrew Green and Alex Westcombe

Cost: PPA members £90 and non-members £100

Contact: ptecourses@gmail.com

Website: <http://ppa.csp.org.uk>

Association of Chartered Physiotherapists in Temporomandibular Disorders (ACPTMD)

Physiotherapy management of temporomandibular disorders (TMD)

Tutor: Phil Bateman

Date: Saturday 27 February

Place: Huddersfield Royal Infirmary

Cost: £149

One-day course reviews:

- relevant clinical anatomy
- physiotherapy assessment of the masticatory system
- classification of common TMD's
- theoretical and practical aspects of

physiotherapy management

- case studies and clinical reasoning.

Contact: Belinda Smith at: action_therapy@yahoo.co.uk for further information and an application form.

Physiotherapy management of temporomandibular disorders (TMD)

Tutor: Phil Bateman

Date: Saturday 30 April

Place: Stepping Hill Hospital, Stockport

Cost: £149 (early bird discount of £129

if booked by 29 February)

One-day course reviews:

- relevant clinical anatomy
- physiotherapy assessment of the masticatory system
- classification of common TMD's
- theoretical and practical aspects of physiotherapy management
- case studies and clinical reasoning.

Contact: Cathy Gordon at: info@romilephysio.com for further information and an application form.

Pelvic, Obstetric, Gynaecological Physiotherapy (POGP)

Physiotherapy assessment and management of pregnancy-related lumbo-pelvic conditions

Date: 11-13 March 2016

Place: London

Cost: £275 POGP member/affiliate, £345 non-member

Introduction to physiotherapy in the child-bearing year

Date: 16 April 2016

Place: London

Cost: £100 POGP member/affiliate/student, £130 non-member

Physiotherapy assessment and management of lower bowel dysfunction – a practical skills-based workshop

Date: 24-26 June 2016

Place: Winchester, Hampshire

Cost: £325 POGP member/affiliate, £395 non-member

For further details of the POGP short course programme or to download an information pack for any of the above courses, please visit the POGP website at: <http://pogp.csp.org.uk/courses-events>

Contact: Email our course administrator via pogpcourses@yahoo.com

Follow us on Twitter: @ThePOGP

Check out the pogp.csp.org.uk website for information on bursaries and funding opportunities.

Electrophysical Agents and Diagnostic Ultrasound (EPADU)

EPADU study day, for physiotherapists working in neurology

Place: The Council Room, Chartered Society of Physiotherapy, 14 Bedford Row, London WC1R 4ED

Date: Wednesday, 13 April 2016.

Registration 9.30am-10am (close 4pm)

Speakers: Leaders in the field, including Professor Dr Jane Burridge, Dr Stephen Ashford, Jon Graham, Christine Singleton, Gary Morris and Peter Harding, will be presenting sessions on the latest FES research, case studies and workshop, independent prescribing in botoxin spasticity and within community neuro services, plus EMG and E-atom guided Botox Injections.

Cost: £40 for members of EPADU professional network/£50 for CSP members/£55 for non-CSP members /£35 for students, to include refreshments.

Contact: To express your interest in attending this day, and for further information please contact Sue Finley at: susan.finley45@yahoo.co.uk

Extended Scope Practitioners (ESP)

ESPPN Study day: 'Topical issues, informing practice: The future of MSK services' (includes AGM)

Date: 22 April

Fantastic CPD opportunity

- This day will focus on a range of issues at the forefront of service development and commissioning, highly relevant for advanced practice clinicians. The day includes evidence based practice and innovative service redesigns.

- Keynote speakers confirmed include Patrick Hourigan on spinal injections, Lucy Arnott on virtual fracture clinics, Stephanie Poulton and Hilda Walsh on developing pain services in addition commissioning from a CCG and service provider perspective. This meeting will include a short AGM where members can influence the direction of the network going forward.

Don't miss out: book online now. Go to our courses page at: www.esp-physio.co.uk/courses

Cost: Early bird rate for members £80* Normal rate £95, non-members £120.

Contact: All enquiries: admin@esp-physio.co.uk
*members need to be fully logged in for reduced rate. Join for only £25. >

Association of Trauma and Orthopaedic Chartered Physiotherapists (ATOCP)

Getting it right in shoulder dysfunction: Applying the science to clinical practice

Leading experts will discuss current research with clinical experience on getting exercise prescription right in shoulder dysfunction. The day will include round table discussion with clinical scenarios developing delegates' clinical reasoning.

Date: 18 April

Place: The Village Hotel, Centennial Avenue, Centennial Park, Elstree WD6 3SB

Cost: ATOCP and EUSSER members £115, non-members £135

Contact: Email: physiocourses@rnoh.nhs.uk to book your place

British Association of Chartered Physiotherapists in Amputee Rehabilitation (BACPAR)

BACPAR needs reviewers for their updated clinical guidelines – Potential for NICE accreditation

Do you want to get involved?

The British Association of Chartered Physiotherapists in Amputee Rehabilitation (BACPAR) are currently undertaking an update of the clinical guidelines for the pre- and

post-operative physiotherapy management of adults with lower limb amputation.

The guidelines update group are at the stage of seeking reviewers of the update, and would like to invite interested Band 5 and Band 6 physiotherapists to volunteer for this. Experience with amputees is not necessary, as the update group wish to find out if these guidelines will support staff working with limited access to expert advice.

The process of updating the guidelines is an evolving process and included in this is now the potential to obtain accreditation from NICE for the guidelines. The update group are working hard to meet all the criteria to facilitate accreditation and as part of this the importance of obtaining reviews from all the identified stakeholders is crucial.

- Would you be a reviewer? If you are interested please contact Sara Smith, BACPAR guidelines co-ordinator, at: sarah.smith2@stgeorges.nhs.uk

Another important question to answer is whether physiotherapists want to be able to purchase a printed version of the whole guideline or is access to a free version via the CSP/BACPAR websites sufficient? To see what the online version would look like, you can use the link below which shows the prosthetic

guideline documents. <http://bit.ly/1ZeJTja>

BACPAR will be printing a quick reference guide and an audit tool for the guidelines, but need to ascertain if a printed version of the full document is required. The update group would value your feedback by following the link to a quick survey monkey questionnaire, please contact us for the link.

Please get involved and help shape, what to date could potentially be, the first physiotherapy guidelines to apply for accreditation from NICE.

British Association of Hand Therapists (BAHT)

For the most up to date information on BAHT accredited courses see: www.hand-therapy.co.uk and follow @BAHTEducation

Level I courses

Date: 3-5 March

Place: Dublin (NES)

Date: 9-11 November

Place: Derby

Date: 10-12 May 2017

Place: London (NES)

Level II courses

Optimising Soft Tissue Function

Date: 13-15 May

Place: Northwood

Contact: Email: handtherapy@sky.com

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Splinting**Date:** 18-20 May**Place:** London (NES)**Contact:** www.neshands.co.uk**The PIP joint****Date:** 7-9 September**Place:** St George's Hospital, London**Contact:** www.neshands.co.uk**Radiographic imaging of the hand****Date:** 19-21 October**Contact:** Email: melanie.arundell@nhs.net or tel: 01332 786964.**The Association of Chartered Physiotherapists Interested in Vestibular Rehabilitation (ACPIVR)****Annual conference and AGM –****Head injuries and vestibular rehabilitation****Date:** Saturday 23 April**Confirmed speakers:** Dr Barry Seemungal, neurologist and senior lecturer in neurology at Imperial College London, UK; Dr Simon Kemp, head of sports medicine, Rugby Football Union, UK; Laura Morris, PT, University of Pittsburgh Medical Center, USA
Place: Basement lecture theatre, 33 Queens Square, National Hospital for Neurology and Neurosurgery, London WC1N 3BG
Cost: ACPIVR members £90 plus booking fee, non-members £130 plus booking fee
Contact: Registration at: <https://acpivr2016.eventbrite.co.uk>**Association of Chartered Physiotherapists in Energy Medicine (ACPPEM)****ACPPEM conference 2016 – Moving beyond technique****Date:** 6-9 May**Place:** The Ammerdown Centre, Radstock, Somerset BA3 5SW**Speakers:** A day with Georgie Oldfield MCSP, specialist on the SARNO technique and founder of the SIRPA Recovery Programme – offering positive outcomes in the management of chronic conditions including pain. A day with Stuart Robertson MCSP, an expert in myofascial release, yoga and breath work for self care and wellbeing, combining the science of physiotherapy, yoga and mindfulness. A half day with Fiona Russell MCSP exploring the physical movements of gyrokinesis with bioenergetic meditation. An evening programme on Saturday. ACPPEM AGM**Cost:** *Early bird *leap year special until 29 February. Members *£370 / £395 full rate. Non-members *£395 / £420 full rateStudents *£230 / £250 full rate
Day rate £125**Contact:** Jenny Gibbs for further information at: jennymb1@me.com or visit the ACPPEM website for application form at: energymedphysio.org.uk**Association of Chartered Physiotherapists Working with Older People (AGILE)****AGILE West study day – Adapted Tai Chi for the older adult****Date:** 5 March, registration from 9am

An interactive, practical study day providing an overview of Tai Chi exercise for the elderly patient.

Course tutor: Ros Smith**Place:** The Friends Meeting House, 1a Ordnance Road, Southampton, SO15 2AZ**Cost:** £75 for AGILE members; £100 for non-AGILE members (includes years membership to AGILE). Lunch provided.**Contact:** Please contact: agile.rep.west@gmail.com for further details and an application form. Limited spaces available.**Info exchange****Study offers new hope to ankle arthritis patients**

A new national multi-centred clinical trial promises to provide a major breakthrough in the treatment of ankle arthritis, investigating whether total ankle replacement is a more effective treatment for ankle arthritis than arthrodesis (fusion).

Ankle arthritis affects up to 30,000 people across the UK each year and can have a major effect on a person's quality of life, many of these patients will access physiotherapy services placing physiotherapists on the front line of identifying potential participants.

Effective recruitment to the trial is vital and total ankle replacement versus arthrodesis (TARVA) is using channels such as social media and an award winning patient information video, starring actor Sylvester McCoy (Dr Who / The Hobbit), to help the TARVA team engage with patients.

It is hoped that the TARVA study will offer vital evidence on the best course of treatment for patients who have this condition and which offers best value to the NHS.

For more information, links to the trial website and patient information video please email: tariq.karim@wvl.nhs.uk**Evaluation of physiotherapist and podiatrist independent prescribing**The University of Surrey and University of Brighton are currently undertaking a Department of Health-funded study investigating effectiveness and efficacy of independent prescribing in physiotherapy and podiatry. Part of the study includes two online surveys, open to all clinicians undergoing independent prescribing training. Surveys take 10-15 minutes and explore views and experiences regarding implementation and educational preparation for training. If you would be interested in participating please contact: judith.edwards@surrey.ac.uk or: pp-ipsurrey@surrey.ac.ukWe are also looking for a prescribing clinician (independent prescribing qualification) to act as a case site. This involves having clinical practice observed by a researcher for up to working five days, during which patients will be recruited to a questionnaire study, and data collected on clinician work activities. We are open to any clinical specialties at present. Please see: <http://bit.ly/1KJn67d> and contact email: kerrie.margrove@surrey.ac.uk if you are interested.**Examination of rehabilitation needs screening approaches in forensic settings**

We are exploring current approaches and future opportunities in screening for rehabilitation needs in forensic populations (prisons, secure settings and community).

We would like to hear from AHPs, nurses, doctors and associated colleagues about how you screen for rehabilitation needs, if there are any tools you use, and about your experiences of the screening process.

We have a particular focus on:

- physical health
- mental health
- learning disability
- developmental needs.

If you have information you can share with us or for more details about our project, please email: fv-uhb.rehabscreening@nhs.net

Please let us know also if you would be willing to complete our short survey and we will send this to you by email. With thanks, Donald McLean, physiotherapist, team co-ordinator, Reach Forth Valley, Stirling Community Hospital, Stirling.

Did you know what to expect when you qualified?

Are you a Band 5 physiotherapist (or equivalent)? Have you been working for 0-1 years? If so, are you interested in taking part in qualitative research to discuss your experiences ➤

in your first job?

Interviews and focus groups will take place in the London area so if you are living there, or are willing to travel, and fit the criteria above, please contact us via our project supervisor Jacqueline Potter, email: j.potter@uel.ac.uk
Information will be provided on receipt.

Charity news / events

A marathon a day to keep bullies at bay



Anyone who has run a marathon will know all about the training involved to undertake such a challenge, but Ben Smith (pictured above) has gone one step further – or 401 marathons further. Ben, 33, is running the 26.2 mile distance every day for 401 consecutive days to raise £250,000 for anti-bullying charities Stonewall and Kidscape. It is equivalent to the distance between London and Sydney and has taken over two years of training and preparation.

Physiotherapists Helen Battersby and Su Barry from The Cloisters Physiotherapy Clinic provided physio support after Ben ran his 101st marathon through Leamington Spa in December. The Bristol-based runner has support from over 200 health-professionals and over 250 running clubs across the country who have helped to prepare and plan his routes. By 5 October this year, Ben will have visited 309 different locations, travelling around in his specially-designed camper van nicknamed 'Florence'.

'Ben was in incredibly good condition when we saw him having just completed his 101st marathon!' said Su. 'He was in extremely good spirits and was just an amazing person to treat'.

As well as his running, Ben has been going into schools to talk to pupils about his goals and why he is undertaking such a mammoth challenge. 'I was bullied in school for many

years, which led to a nervous breakdown and a situation where I tried to take my own life. A couple of years ago I admitted to myself that I was gay, and I've never been happier. The more people talk about it, the more we spread the message that bullying shouldn't be part of our society. It's trying to raise awareness as well as raising a quarter of a million pounds for the two charities'.

CSP Retirement Association



CSP Retirement Association

News and information from the CSPRA. Upcoming meetings, events and also details of get-togethers in your area.

Contact Sue Russell at:
news4sue@keleus.com

Lyn Ankorn reflects on the early days of respiratory physiotherapy. She wants to dedicate this article to those who lost their lives in a little reported incident when a suicide bomber detonated explosives outside a polio eradication centre in Pakistan's western city of Quetta, on Wednesday 13 January 2016, killing 14 people and seriously injuring many more.

Five shillings on call

As newly qualified physiotherapists, we did not receive pay for our out of hours service as it was considered that our salary of £520/PA would cover this. Thoracic surgery was in its infancy – thoracotomies and pneumonectomies for lung TB were just starting following the introduction of PAS (Para-Amino salicylate Sodium), and intramuscular streptomycin (the first antibiotic for TB). These medications were unpleasant, patients were nauseated, and the IM oily streptomycin very painful. This enabled TB to become quiescent so that surgery could be performed. Thoracic, general surgeons and physicians realised the value of

respiratory physiotherapy and wanted 24 hour cover. Autonomy came and funding found five shillings (25p) a night 'on call'. Hospitals did not have ITUs at the start of thoracic surgery, and the physiotherapy input was to make sure the patient regained as much lung function as possible; with attention to postural alignment.

Our first ventilators were negative pressure ventilators (non-invasive ventilation) used in the polio epidemics. It was initially developed using external negative pressure generated by respiratory assist devices to create the 'iron lung'. Around 1970, the very first ventilators providing positive intrathoracic pressure by means of intratracheal tubes were being used in intensive care units. They were very primitive and gave very little feedback. Blood gases had to be taken via a glass phial to the external laboratory for monitoring within 20 minutes; this called for a sprint down hospital corridors. O2 sats machines had not been invented yet. To start with we did not even have bronchodilation drugs. These were gradually introduced, and have been life changing for so many of our patients.

I admire the achievements of the physiotherapist today, especially the evidence based practice which makes their work so valuable. It is good that non-invasive ventilation, the introduction of pressure support ventilation, advances with bronchodilators, steroidal and non-steroidal based inhalers etc. are playing such an important part in modern treatment. Our treatment modalities centred round improving lung function by postural drainage and sputum clearance by various means. In the very early days Dr Nelson steam inhalers were used – now valuable antiques!

It is sad to read that drug resistant TB is returning; respiratory medical conditions received many hours of physiotherapy. I hope that some of the very early work that I and other retirees did has helped to advance the treatments of today.

Lyn Ankorn

Retirement does not mean losing contact with physiotherapy colleagues. Groups co-ordinator, Gillian Jordan explains about CSPRA groups:

There have been some queries from retired physios keen to become involved in local groups. Several groups are already very active and meet at intervals for coffee and chat, lunch and longer chat, walks, theatre visits and so on. It depends on the group how often they meet and what they do.

Sue Gray in Glasgow has already met with some retired colleagues and would welcome

more members. She can be contacted at: physio_sdg@hotmail.com

Margaret Stevens, who can be contacted at: magast19@gmail.com would welcome meeting retired physios in the Poole or Bournemouth areas and would be prepared to travel as far as Southampton, Salisbury, Winchester or Dorchester to meet up.

Alison Leighton, who can be contacted at: alisonleighton2@btinternet.com hopes there are some colleagues in the Milton Keynes area or in Bucks, Oxford or Northants who would like to get together.

Elizabeth Henderson, who can be contacted at: lizhenderson.uk@gmail.com is in Helensburgh, Dunbartonshire and would like to meet up with retired colleagues in the area.

Lyn Ancorn, who can be contacted at: lyn.ankcorn@virginmedia.com or by tel: 07798 525822 in Birmingham suggests a meeting at Caffé Concerto, an upmarket Italian patisserie, 10.30am onwards on Friday 8 April 2016 in the heart of the brand new Grand Central Birmingham, lovely shops and restaurants! Situated on top of New Street Station, well served by trains and buses: see www.grandcentralbirmingham.com Free to visit Art Gallery and New Library afterwards.

If any other people would like to meet with other retired colleagues, please get in touch with me at: gillie@gillianjordan.org so I can match names and locations.

PS I am in North London and would be delighted if retired physios north of the Thames would contact me and we can arrange a get-together!

Gillian Jordan, CSPRA groups organiser

York Event

Date: 5 May 10am-3pm

Place: Bar Convent event facility, York (five minutes' walk from station)

Cost: Delegate price £15 includes all day tea and coffee and light lunch. Pay on the day.

Format: Two speakers in the morning, lunch, one speaker in the afternoon

Contact: If interested email: judith6072@hotmail.co.uk

Closing date: 28 April

The CSPRA hope this event will encourage our northern members, like Glasgow, and of course all are welcome. Accommodation is available at the Bar Convent if I have prior notice. Speakers will be confirmed by February. I hope this will be a successful spring event.

Judith Saunders, chair CSPRA

Glasgow retirement group

If you are approaching retirement or already retired, you are welcome to join our evolving Glasgow group who plan to meet a few times a year for lunch or other activities. We meet in Glasgow as a convenient central place, but you do not need to have worked in Glasgow to join us.

We have only had two meetings since we began in summer 2015, so now is the time to join us and help shape our future plans.

Our next meeting is at 1pm on Thursday 3 March in Kelvingrove Art Gallery in Glasgow. Please contact Anne at: a_forrester50@hotmail.com if you would like to join us in March or be informed of future events. Do please contact us by 21 February if you wish to attend and we will send you further details about lunch/meeting plans.

East Anglian retirement group

The next meeting, in spring 2016, will be in Cambridge. Contact: jacquipotter@outlook.com for information.

Reunions

The Royal London Hospital Physiotherapy old students association

The next annual meeting of RLHPOSA will be on Saturday 23 April in the Old Library of the Medical College. Members should have received details in the January Newsletter. Anyone who trained or worked at RLH, NELP, PEL or UEL is welcome. This year we will be celebrating 80 years since the founding of physiotherapy training at The London. Our speaker will be Joan Piercy, FCSP, BA. As usual we meet up for coffee and a brief business meeting. A sandwich lunch is provided. Booking is essential and must be completed by Friday 15 April. If you do not receive our newsletter, please see our website: www.rlhposa.org.uk for information and contact details or email: info@rlhposa.org.uk Come and celebrate with us and meet up with old friends and colleagues.

Royal Orthopaedic Hospital Woodlands 1983-1986

Any one interested in meeting over the summer in Birmingham to celebrate 30 years? Please contact Fiona Harding (nee Johnson) or Pat Chapman (nee Leckenby). We would

love to hear from you. Email please to: fiona.fm.harding@talk21.com or: trish.chapman147@googlemail.com

Sheffield Polytechnic 1978-1981

Some of us had a successful reunion in September 2015 and would like to do it again in 2016 – please save the date – Saturday 10 September 2016. It will be 35 years since we qualified – please join us before people get harder to find as retirement options begin! We will walk in the morning, in beautiful Derbyshire countryside, and eat at lunch and in the evening. Come and join us for all, or part of the day. Please email Nikki Adams at: n.adams@adamsneurophysio.org.uk (originally Bramson) for more details.

Withington Hospital, Manchester 1983-86

It is 30 years since we all became physiotherapists and we spent three great years together at Manchester's Withington Hospital. 1983-86. We are getting together on Saturday 21 May 2016 for a meal and drinks in Didsbury to reminisce and catch up. Please do get in touch if you were part of the 1983-86 Withington set and would like to join us. Looking forward to getting together. Dawn Narborough (McCoy), email: narborough.family@gmail.com

The Royal Orthopaedic Hospital School of Physiotherapy – 'The Woodlands' 1969 - 1972

It is 43 years since we qualified and, whilst some of us are in contact, we have never organised a set reunion. If you are interested in meeting up sometime during the summer of 2016 please email me, Marilyn Andrews, at: m.p.andrews@keele.ac.uk It would be lovely to catch up with everyone after all this time.

United Liverpool Hospitals School of Physiotherapy 1977-1980

Hello! I was wondering if after all this time you'd like to meet? If you would, contact Karen (McLoughlin) at: email: ladylittler@gmail.com Please share with tutors et al: Eileen Thornton that includes you!

University of Northumbria 1993-1996

Save the date – Class of 96 reunion in Newcastle, Saturday 24 September 2016. It will be 20 years this year since we have graduated so it would be great to have a get together! Details TBC. Please pass this message on to people who you are still in contact with. Please get in touch via email to Nicola Idowu (nee >

Henderson) at: nichen74@yahoo.co.uk or see the Facebook page at: <https://www.facebook.com/groups/943057765730497/?fref=ts>

Bradford Hospitals School of Physiotherapy Set 1974-1977/8

It has now been more than 40 years since we all met in Bradford to start our physiotherapy training. Jill, Mary, Mary, Liz, Janet and Barbara shared a weekend in 2015 and plan to reunite this year.

We all wish to widen the circle by inviting everyone from our year to join us and meet this year. We plan to meet in Bradford over a weekend to revisit old haunts and local Yorkshire beauty spots – time and exact location yet to be decided. It would be great to hear from you. If you would like to join us, please contact. Jill Cooper nee Emery at: jill.cooper@hotmail.co.uk or Barbara (nee Sharp) at: barbara.marsland@gmail.com

Nottingham School of Physiotherapy

We are planning a reunion for the Nottingham leavers from 2001 in 2016 – it will be 15 years since we qualified. There are still people we have not been able to track down email addresses for – Darren, Cath, Carl, Nicky, Sue, Carol. If this is you please contact me at: rfieldhouse78@hotmail.com

Prince of Wales (POW) Set A 1966-69

Remember us – Angela Hancock-Martin, Jenny Eve, Marion McKenzie, Anne Brown? We hope to get in touch with Elaine Slater, Prunella Patel, Tina Laflin, Sue Frankel and perhaps others from Set A for a possible get-together this year, or just to hear how the passing years have treated you! Please contact: angedcourt@googlemail.com and/or: awbrown15@gmail.com Hope to hear from you.

St Mary's Paddington Class 1971-1974

Anyone out there from class 1971-1974 who would love to meet and catch up? Contact by emailing: lesrust@gmail.com

The Queen's College Glasgow Class of 1981 – Nearly 35 years!

Are there any old gals and guys out there interested in a get together perhaps in June to reminisce, celebrate and commiserate?

If there is an appetite for a bash we will be happy to do the planning. Please reply to:

susan@familyhastings.com
Looking forward to hearing from you!
Jillan Rae (nee Craig), Irene Pullar (nee Caddie) Susan Hastings (nee Clunie)

Kings College Hospital 1966-69 October set

I am trying to organise a reunion for our set and have so far been in touch with three others from the set who are all keen to meet up. Please get in touch with me at: carolyn@beavisnet.co.uk if you are interested during 2016, probably October time, as it will be 50 years since we started our training! Venue is not decided yet. If you know of people from the set who don't get *Frontline* please can you pass this on. Thank you so much. Carolyn Beavis (nee Gray).

Prince of Wales POW F Set (aptly named!) 1965

Our 50th anniversary (golden)! Anyone interested in a reunion? We already have a few who would like to meet up. Open to suggestions on day and venue. Please contact Elly on tel: 01548 521391 or email: eratthehaybarn@uwclub.net

West Middlesex Hospital School of Physiotherapy 1975-1978

Reunion? I have now contact with 14 students/physiotherapists from our set, but some are still 'missing'. Are you 'one of us', or do you know someone who graduated from West Middlesex 1978? Of so, please contact Lars Andersen on email: la-and@online.no

School of Physiotherapy, Withington Hospital Manchester 1973

Lenia from Nicosia, Cyprus would like to get in touch with friends from the school of physiotherapy, Withington Hospital Manchester 1973 intake.
Email: elenidracopoulou@gmail.com

Northern Ireland School of Physiotherapy – Belfast 50th anniversary reunion

We have continued to meet since our reunion and are now planning the 50th reunion of our qualification in 1964, which will take place at a suitable date in 2017. We hope to have another luncheon party this spring so if any other physiotherapists would like to attend please get in touch with me at: jarcherphysio@aol.com

Edinburgh Royal Infirmary 1963-1966

Anyone out there still working? Fancy meeting up? Email me on: madelinesg14@tiscali.co.uk or tel: 01992 586659.

West London School of Physiotherapy

John M B Long would like to hear from ex-students who were there in the 1950s.
Email: jmblong@hotmail.com

Salford School of Physiotherapy, Hope Hospital 1974-1977

It's a long time since we left Salford. If you are interested in a reunion or just a catch up by email, please get in touch with Jane Heyer at: janeheyer@rocketmail.com

The Joint Service School of Physiotherapy

The reunion of The Joint Service School of Physiotherapy (JSSP) took place on 7 November at RAF Halton. Attended by over 70 past students and staff of JSSP we enjoyed speeches from Lt Col Gareth Thomas RAMC who read out messages from absent friends and also raised a toast to friends no longer still with us. Lt Commander Gordon Joslin RN Rtd former principle of the school gave a touching and also most hilarious speech recounting many happy memories of a training school that produced physiotherapists both military and non military who had the benefit of a training that was truly second to none. JSSP closed in 1985 so our reunion 30 years after it closed its doors and to have so many travel back to RAF Halton is true testament to the affection we all hold for our training school.

We would like to especially thank Moorings Mediequip Ltd who kindly sponsored our reunion by contributing toward the paying of the event insurance required when hosting an event in a £6million stately home!



Thinking of having a reunion?

Need to contact old friends?

Send an email to

networkads@csp.org.uk

Don't forget... after your reunion has taken place, send *Frontline* a photo and tell us about it!



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CHARTERED SOCIETY OF PHYSIOTHERAPY

Courses – Guidance for members

Members have a responsibility to limit their practice to those areas in which they have established and maintained their competence. Completing a course may not be sufficient to establish personal competence in a new area, while members are responsible for undertaking CPD to maintain their competence in all areas of their current practice.

Members should explore individual courses' suitability and value (including their quality, intended outcomes and whether they include formal assessment of learning) for meeting and demonstrating fulfilment of their personal learning needs. Members should also think about the broader ways in which they can address their learning needs. These include day-to-day practice, self-directed and mentored learning, and professional networking and peer review.

It is important that members evidence their learning: maintaining a record of CPD is a regulatory requirement of the Health and Care Professions Council (HCPC), while recording the education and training undertaken to support progression into a new area of personal practice is a condition of CSP professional liability insurance (PLI) cover.

A course being advertised in *Frontline* does not necessarily mean that it is relevant to all members, has gone through a quality assurance process (courses advertised in the magazine are not formally recognised by the CSP unless explicitly stated), or that its topic area falls within the scope of UK

physiotherapy. In addition to issues of competence, including an area within personal and collective scope of practice depends on the context in which it is practised, how it is integrated into physiotherapy activity, how it is promoted as a service delivered by a physiotherapist and how its physiotherapeutic value is demonstrated.

Some areas ordinarily sit outside the scope of UK physiotherapy. However, they may be undertaken by CSP members as part of extended activity. Members should ensure that this is with the agreement of their employer and/or explicitly as a service delivered outside their activity as a physiotherapist; is supported by appropriate education and training; and is covered by insurance from a source other than the CSP. Courses advertised in *Frontline* may be relevant to members extending their activity in this way.

Further guidance and support:

- CSP ePortfolio: www.csp.org.uk/ePortfolio
- CSP Code of Professional Values and Behaviour: www.csp.org.uk/code
- *Frontline* CPD series (published in each issue)
- HCPC CPD requirements: www.hpc-uk.org/aboutregistration/standards/cpd



CSP Charitable Trust Funding for Qualified, Student and Associate Members *Spring 2016*

Academically Accredited Courses Award

This award contributes towards course fees with up to **£300** available for a 20 credit course, **£1200** for a 180 credit course (MSc) and **£1500** for a PhD

Courses supported in previous years include:

- Advanced Theory CYQ Level 3 Anatomy and Physiology for Exercise and Health
- Independent and Supplementary Prescribing for Nurses, Midwives and AHP
- PG Certificate in Ergonomics
- MSc Global Health and Development
- MSc Advancing Practice
- MPhil/PhD in Asthma, Allergy and Lung Biology.

Education and Development Placements Award

This award scheme covers:

- 1) International study visits/research projects to overseas centres of excellence – awards of up to **£3,500** available
- 2) International education and development projects – awards of up to **£3,500** available
- 3) Student Elective Placements (UK and overseas) – awards of up to **£750** available

Successful applications to this award have included:

- Research visits to Brisbane and Perth to explore international collaborations examining ways to improve recovery after critical illness
- Development projects in: Zambia, Tanzania, Thailand and Gambia
- Student elective placements within the UK and to: Nepal, Cambodia and Romania.

All applications are submitted via the CSP ePortfolio and are assessed by the CSP Educational Awards Panel. The next deadline is **22 March 2016**. For more information including details of how to apply please visit: <http://www.csp.org.uk/charitabletrust>

The CSP Charitable Trust

Registered Charity No. 279882

Supporting the advancement of

physiotherapy education and research



Courses & conferences

Cardiorespiratory

Postgraduate course in Pulmonary Rehabilitation

When: 18 April 2016 – 19 April 2016

Where: Clinical Education Centre, Glenfield Hospital
A series of lectures and workshops will cover: • BTS Audit findings and improvement planning • Strength and endurance training • Exercise testing and other outcome measures • Rehabilitation around the time of an exacerbation • Physical activity monitoring and interventions • Facilitating behaviour change and motivational interviewing. Registration fee includes lunches & refreshments on both days, the course manual and dinner on Monday 18th April- £280.

Contact:
Linda Fenton
linda.fenton@uhl-tr.nhs.uk
01162583652

Complementary therapy

THE 50 MOST USEFUL ACUPUNCTURE POINTS REVISED (10 hrs CPD) (1 day)

Multiple dates in Surrey, London, Bath and Loughborough.

With: Hubert van Griensven

Contact: www.physiouk.co.uk/
hubert or call 0208-787-5963

Complementary therapy

Foundation in Acupuncture Course

When: 13, 14, 15 May, 24, 25, 26 June 2016

Where: Birley Campus, Manchester Metropolitan University

Tutors: Dr Mei Xing and Kay Hurst

Contact: cpd.hpsc@mmu.ac.uk

Learn to use Acupuncture for the treatment of musculoskeletal conditions using a combination of Chinese medicine and western approaches. The course is highly practical and interactive with two highly experienced tutors, delivered in a brand-new purpose built educational facility.

For more information: www.hpsc.mmu.ac.uk/courses/cpd and search 'Acupuncture'

Foundation Acupuncture Training

When: 20-22 May 9-10 July

Where: Poole Hospital NHS Foundation Trust, Longfleet Road, Poole, Dorset, BH15 2JB

Tutor: Jenny Longbottom
MSc MEd BSc FCSP BMAS

Cost: £495 including needles, manuals and refreshments.

Contact: Laura Young
laura.young@poole.nhs.uk
01202 448657

ACUPUNCTURE IN PREGNANCY

When: 9th April 2016

Where: Chertsey, Surrey

When: 1st Oct 2016

Where: Available to host (Northern venue)

With: Cheryl Mason

Contact: www.physiouk.co.uk/
cheryl or call 0208-787-5963

ACUPUNCTURE IN WOMENS HEALTH

When: 3rd Sept 2016

Where: Hemel Hempsted

With: Cheryl Mason

Contact: www.physiouk.co.uk/
cheryl or call 0208-787-5963

Pilates Teacher Training Course

When: 31 Jan. 2016 – 31 Dec. 2017

Where: The Physiotherapy & Pilates Rehabilitation Centre, Clevedon, Bristol
A comprehensive Pilates training course run in affiliation with Alan Herdman Pilates, covering all aspects of Pilates training from beginners matwork to advanced equipment including conditions and special populations. Flexible start date.

Contact:
Karen Pearce or Sarah Sessa
info@physioandpilatesrehab.co.uk
01275871935

Electrotherapy

Laser Therapy Training 2016

When: 20 February

Where: London

When: 19 March

Where: Basingstoke
Theory, dosage, safety, contraindications, regulations, hands on training.

Cost: £200.

Contact: Course Leader:
James Carroll FRSM. 01494 797100, www.thorlaser.com
Register online - Early Bird Discounts available

Manual therapy

THE TMJ AND SINUS PAIN COURSE with David Lintonbon

When: 15-17 April

Where: Hemel Hempsted London

When: 12-14 August

Where: Edinburgh

Contact:
info@club-physio.net

Learn manual therapy techniques for treating difficult head and facial pain patients with TMJ disorders and sinus pain

Advertise in Frontline

Get in touch with Media Shed
cspads@media-shed.co.uk

Manual therapy

Clinical Yoga Level 1 For Physiotherapists

Tutor:

Catherine Huck MSc. MCSP

When: Sunday 20th March 9-5

Where: Oxford

Cost: £100

This highly practical course will cover the following level 1 topics to allow the physiotherapist to immediately incorporate yoga safely within their clinical practice:

Developing rehabilitation skills using yoga postures.

Gaining an understanding of yoga as an holistic physiotherapy tool.

Reviewing the scientific research and it's applicability to clinical yoga.

Learning correct alignment and postures, taking into account age, injuries, ability levels and experience.

Exploring clinical yoga for different clinical scenarios.

Discussing the planning of a clinical yoga class.

Catherine qualified as a physiotherapist 30 years ago, with a deep interest in normal movement in both a neurological and musculoskeletal situation. She began practicing yoga 13 years ago and has explored the practice as a physiotherapist and clinician.

10 places only

Contact: 07704934203 or catherine@thepracticeoxfordshire.co.uk

DRY NEEDLING COURSES DN 1 & DN 2 and REVIEW COURSE

When: 12-14 APRIL (DN 1) / 15-17 April (DN 2 and review course on day 1).

Where: Watford, London

Contact:

info@club-physio.net

Join 1000's of therapists who have been trained and now effectively treating myofascial pain with dry needling. No acupuncture experience required; DN1, DN2 and Review course and certify as a DN Practitioner.

Sporting Hip & Groin (with James Moore)

When: 13 Feb. 2016 – 14 Feb. 2016

Where: Orpington

When: 27 Feb. 2016 – 28 Feb. 2016

Where: Bolton

When: 19 March 2016 – 20 March 2016

Where: Burton on Trent

When: 9 April 2016 – 10 April 2016

Where: Cambridge

When: 23 April 2016 – 24 April 2016

Where: London

Fee: £250

Contact:

Ken Joy
info@heseminars.com
01202 568898

Functional Rehabilitation of Shoulder Muscles - evidence & application

When: 9 April 2016 – 10 April 2016

Where: Loughborough

When: 16 April 2016 – 17 April 2016

Where: London

When: 23 April 2016 – 24 April 2016

Where: Bolton

When: 30 April 2016 – 1 May 2016

Where: Southampton

Tutor: Assoc Prof Karen Ginn - world renowned shoulder specialist. Course Fee: £276

Contact:

Ken Joy
info@heseminars.com
01202 568898

SCOTLAND COURSES

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NORTHERN ENGLAND COURSES

See the full list of our courses in the north of England at www.physiouk.co.uk/north

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cs pads@media-shed.co.uk

Better than the January Sales!

When: 11 Jan. 2016 – 31 Dec. 2016

Where: Online

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Contact:

Musculoskeletal Association of Chartered Physiotherapists
administration@macpweb.org
01202706161

SEE A PRESENTER COMPARED TO A MIX OF BRIAN BLESSED AND DAVID BELLAMY....

Learn myofascial release with John Annan (2 days) see the reviews at the course pages on the link below

Multiple dates in Scotland, Surrey, London, Loughborough and Yeovil.

Contact: www.physiouk.co.uk/john or call 0208-787-5963

Manual therapy

BORED WITH PHYSIO AND WANT SOMETHING THAT WILL RELIGHT YOUR FIRE?

This is the whole body series with with LJ Lee, formerly the Discover Physio Series.

Starts in April. See www.physiouk.co.uk/theseries or call 0208-787-5963

MULLIGAN LEVEL 1 (2 days)

When: 2nd-3rd July 2016

Where: Loughborough

When: 13th-14th Aug 2016

Where: Hemel Hempstead

Contact: www.physiouk.co.uk/mulligan2016 or call 0208-787-5963

SPORTS PELVIS & HIP WITH LJ LEE (3 Days)

When: 21st – 23rd April 2016

Where: London / Surrey

Contact: www.physiouk.co.uk/pelvis or call 0208-787-5963

DOUG HEEL – BE ACTIVATED LEVEL 1 2016 DATES (2 days)

When: 2nd-3rd April 2016

Where: Surrey

When: 9th–10th April 2016

Where: London

Contact: www.physiouk.co.uk/doug or call 0208-787-5963

THORACIC RING APPROACH (4 Days) – SPORTS THORAX COURSE

When: 6th -9th April 2016

Where: Surrey

Contact: www.physiouk.co.uk/thorax or call 0208-787-5963

HIP: IS IT AN FAI, LABRAL TEAR OR LIGAMENTOUS TERES INJURY?

When: 16th April 2016

Where: Edinburgh

When: 14th May 2016

Where: Chertsey, Surrey

With: Benoy Mathew and Glen Robbins

Contact: www.physiouk.co.uk/hip or call 0208-787-5963

Laser Therapy Training 2016

Please refer to advert in Electrotherapy section

Chris Worsfold's Clinical Whiplash & Neck Pain Course

12th / 13th March
Chelsea & Westminster Hospital,
369 Fulham Rd,
London SW10 9NH.

Cost: £240

Visit www.clinicalwhiplash.com/courses

Email: michelle@tonbridgedclinic.co.uk

Dynamic Movement Screening and Functional Exercise with Bob Wood

When: 23 & 24 April;

Where: Royal United Hospital, Bath, BA1 3NG

Course Cost: £210 to include a copy of Physical Solutions Illustrated Functional Training Resource.

Closing Date: Friday 8 April 2016

Course Information:

Bob Wood from Physical Solutions will be joining us to deliver this popular hands-on course. Suitable for all levels of experience, the course will encompass:

- Practical Screening in diagnostic, injury prevention and performance enhancement;
- Techniques to evaluate movement competence;
- Understanding and assessing primal movement patterns;
- Recognition of movement dysfunction 'in-motion' and subsequent corrective exercise strategy;
- Understanding functional exercise and progression from a performance and a rehab perspective;
- Practicing exercise progressions.

This is a 'learn by doing' course and a physical two days!

For an application form, please contact Vanessa Rubery, course administrator:

Email: vanessarubery@nhs.net

Tel: 01225 824292

For further information about the course, or queries about course content, please contact Physical Solutions: www.physical-solutions.co.uk Email: info@physical-solutions.co.uk

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Miscellaneous



Become a Pilates instructor with the APPI

APPI PILATES MATWORK Certification



The APPI curriculum is designed by Physiotherapists specifically for those working in the field of rehabilitation. Exercises cover pain, pathology, and function.

Also available:

Pilates & Osteoporosis

4th March - London
13th March - Scotland

Standing Pilates

5th and 6th March - London
2nd and 3rd April - Northern Ireland
16th and 17th April - Manchester

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www.appihealthgroup.com

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Neurology

A Two Day Master Class with Prof Daniel Becker & Prof Diego Centoze packed with theory and practical sessions.

Why & How Does FES Enhance Recovery in Central Nervous System Conditions?

When: May 21-22 2016

Where: At Birkdale Neuro Rehabilitation Centre West London

Description:

"FES has been associated with improved spasticity, motor control, bladder function, gait, upper extremity dexterity, and quality of life. Further, analysis of cerebrospinal fluid before and after FES revealed an enhanced neural repair program and a reduced inflammatory environment within the CNS." Prof Daneil Becker

- How many different types of FES applications are there?
- What types of conditions could FES apply to?
- What kind of physiological responses occur with FES?
- How does FES affect remapping? How does that translate in to daily function?

Cost: £250

Contact: Taraneh Yamini at Birkdale Neuro Rehabilitation Centre for a booking form & a programme

Tel: 020 8795 2209

Email: info@neuro-physio.co.uk
www.birkdaleneurocentre.co.uk

2nd conference on Recent advances in the assessment, diagnosis and MDT management of people with severe brain injuries/ Disorders of Consciousness (DOC)

When: 13 Sept. 2016 – 14 Sept. 2016

Where: The Old Thorns Manor Hotel, Liphook, Hampshire. GU30 7PE

This conference is aimed at Physiotherapists, Occupational therapists, Nurses, case managers, personal injury lawyers and other professionals who work with people with DOC. Expert clinicians and leading academics will be talking on recent advances in the field. A selection of recent research presentations and posters will also be available.

Contact:

Rasheed Meeran
r.meeran@holycross.org.uk
01428 647649

Advanced Balance Course

When: 14 June 2016 – 17 June 2016

Where: Chilworth Manor

A course aimed at building your vestibular knowledge and skills. Join us for our final celebratory 20 year anniversary course!

Contact:

Fiona Barker
fiona.barker@windsor-ent.co.uk
0790 779 1619

Pain management

KNOW PAIN WITH MIKE STEWART (2 days)

When: 2nd–3rd April 2016

Where: Milton Keynes

When: 26th–27th Nov 2016

Where: Peterborough

Contact: www.physiouk.co.uk/knowpain or call 0208-787-5963

PAIN AND PHARMACOLOGY WITH DAVE BAKER (1 DAY)

When: 26th Nov 2016

Where: Crystal Palace

Contact: www.physiouk.co.uk/davebaker or call 0208-787-5963

Laser Therapy Training 2016

Please refer to advert in Electrotherapy section

Mirror Therapy

When: 5 March 2016

Where: University of Leicester

Mirror Therapy uses a visual illusion to treat one-sided pain conditions and motor and sensory problems after stroke and hand surgery. Interactive course on current evidence and international practice.

Contact: Annegret Hagenberg, 0116 229760, www.le.ac.uk/cmh-cpd

Sports medicine

Want some inspiration in physiotherapy?

See our advert in manual therapy

DOUG HEEL BE ACTIVATED 2016 DATES

See advert in manual therapy

RUNNERS COURSE: MOVEMENT SCREENING AND STRENGTH TRAINING

When: 17th April 2016

Where: Edinburgh

With: Benoy Mathew and Glen Robbins

Contact: www.physiouk.co.uk/edinburgh or call 0208-787-5963

RUNNERS COURSE - 2 Day – S&C AND RUNNING RETRAINING

When: 7th–8th May 2016

Where: Burton on Trent

With: Benoy Mathew and Glen Robbins

Contact: www.physiouk.co.uk/runners or call 020-8787-5963

WANT A GOOD REHAB AND HANDS ON TREATMENT UL AND LL COURSE WITH REAL PATIENT DEMOS?

When: 24th–25th June 2016 (UL)

Where: London

When: 26th–27th June 2016 (LL)

Where: London

Tutor: Tanya Bell

Contact: www.physiouk.co.uk/tb or call 020-8787-5963

Laser Therapy Training 2016

Please refer to advert in Electrotherapy section

Women's health

THE LATEST ON ASSESSING AND TREATING DIASTUS RECTUS ABDOMINIS (2 DAYS)

When: 23rd–24th April 2016

Where: Milton Keynes

With: Samantha Gillard

Contact: www.physiouk.co.uk/dra3 or call 0208-787-5963

DIANE LEE 2 DAY ABDOMINAL WALL COURSE

When: 10th – 11th July 2016

Where: London

Contact: www.physiouk.co.uk/diane or call 020-8787-5963

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East Midlands Conference Centre, Nottingham, NG7 2RJ
16 – 17 April 2016



Conference Speakers and Lectures:

Professor Bill Vicenzino BPhy Grad Dip Sports Phy MSc PhD Chair in Sport Physiotherapy, University of Queensland, Australia.

- Evidence informed approach to managing Chronic Tennis Elbow: injections, physiotherapy or wait it out?
- Slipping the boot into Patellofemoral Pain: an evidence informed pragmatic approach.

Professor Karim Khan MD PhD Department of Family Practice at the University of British Columbia, Canada.

- Physiotherapy scope of practice: let's discuss exercise prescription and healthy eating advice.
- Mechanotherapy: how it underpins every musculoskeletal physiotherapy treatment.

Joanne Elphinston, Director of Elphinston Performance Ltd and JEMS Professional Movement Education.

- Poetry in motion? Movement, reasoning and the sporting patient.

Lynn Booth MCSP MSc

- Exercise progression from a clinical environment to a sporting venue.

Seth O'Neill MSc BSc PGCE HE MMACP MSCP

- Lower limb tendinopathy - what works and why.

Dr. Kieran O'Sullivan PhD M Manip Ther B Physio SMISCP MISOM

- Back pain: if all I have is a hammer?

Ms Celia Champion, Director Painless Practice

- Social media for physiotherapists

Dr. Catherine Spencer - Smith, Consultant Physician in Sport and Exercise Medicine MBBS DRCOG MRGCP MSc Sport Ex Med FFSEM

- Getting to grips with the tricky world of hip and groin pain.



Bookings are open now! Avoid disappointment and secure your place today!

Standard Prices (Bookings Close 11 March 2016)

Members: £220 1 day - Saturday or Sunday only / £335 Full Conference 2 days - Saturday and Sunday

Non-Members: £275 1 day - Saturday or Sunday only / £390 Full Conference 2 days - Saturday and Sunday

Book online and receive £10.00 Discount - www.physiofirst.org.uk

Alternatively, please call 01604 684 968 between 9am – 5pm, Monday to Friday to process your booking.

Please quote Frontline Media Shed when making your booking

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Glasgow AXAHS534,
Bristol AXAHS535**



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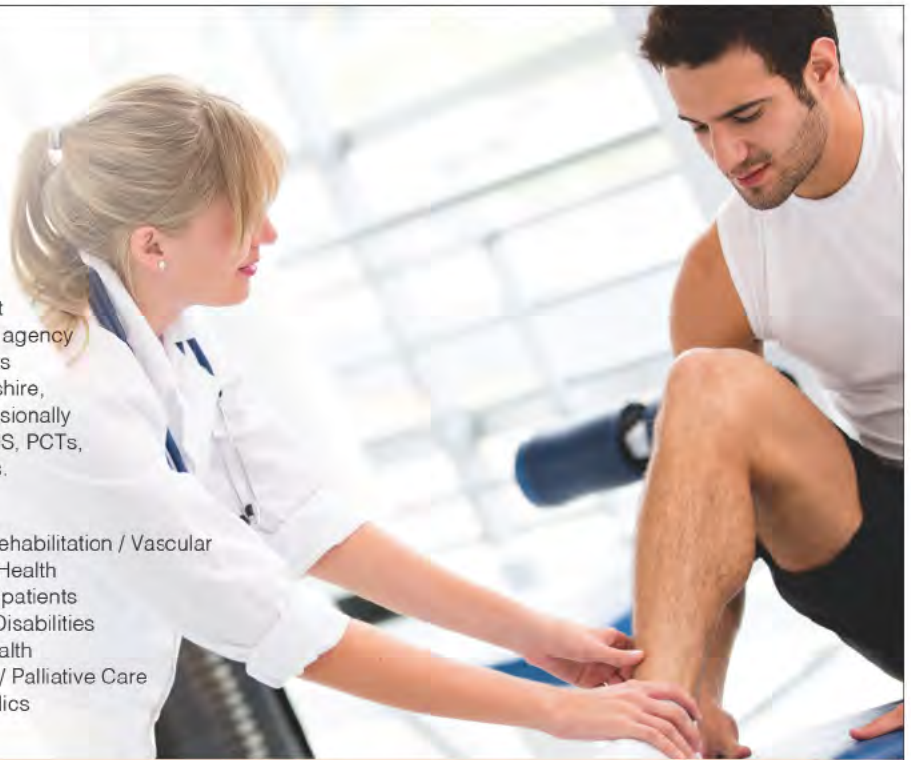
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- Cardiac Rehabilitation / Vascular
- Women's Health
- General Inpatients
- Learning Disabilities
- Mental Health
- Oncology / Palliative Care
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Paediatric Research Funding 2016

The **CSP Charitable Trust** in conjunction with **Action Medical Research** is offering a paediatric research funding award for experienced researchers in 2016:

Paediatric research funding

*for experienced
researchers*

Up to £250,000 for a research project to support research into paediatric non-acquired brain injury and/or paediatric cerebral palsy

The deadline for outline applications is:
5pm, Wednesday 30 March 2016

Further details on this call are available at:
www.csp.org.uk/prf

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Physiotherapy Research Foundation

Research Awards 2016

The **CSP Charitable Trust** is pleased to announce the **Physiotherapy Research Foundation (PRF)** award scheme this year. The trust is now accepting research applications for funding in 2016.

Scheme A

*for experienced
researchers*

**Up to £150,000
available for
research
projects**

Scheme B

*for novice
researchers*

**Up to £25,000
available for
research
projects**

Scheme B

Paediatric research funding
for novice researchers

Up to £25,000

of funding in the area of
paediatric non-acquired brain
injury and paediatric cerebral
palsy, available for one
research project

The deadline for outline applications
is **12 noon, Friday 11 March 2016**

Guidance notes and outline application
forms for each scheme can be found at:
www.csp.org.uk/prf

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WINCHESTER Part-time hours available in busy sports injury and physiotherapy clinic. Daytime and evening shifts needed. Ideally five years qualified and must be experienced in musculoskeletal conditions. Email enquiries and CV to: winchesterphysio@btconnect.com

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LONDON/ESSEX BORDER Experienced musculoskeletal physiotherapist required, on a self-employed basis. Must have minimum of five years' experience. CSP/HPC registration. Flexible part-time hours and days. Electrotherapy and acupuncture experience advantageous. Please send CV to: ruthy.c11@hotmail.co.uk

NW LONDON Boost Physio seek a full-time employed and a part-time physio to join our friendly team of 18. We have four high street clinics specialising in outpatient musculoskeletal and orthopaedics See: www.boostphysio.com Please email your CV to: info@boostphysio.com or call for a chat on tel: 020 8201 7788.

PART-TIME PHYSIOTHERAPIST REQUIRED FOR BUSY PRACTICE IN GP SURGERY in Newbury Park, Essex. Must be able to work independently. Great opportunity for the right person. Please contact: ashleyspivack@palmsphysio.co.uk

BAND 5 OR 6 DOMICILIARY LEARNING DISABILITIES PHYSIOTHERAPIST (both adults and paediatrics) to work directly with me or one of our Band 7's in Purley

and South London on a part-time flexible basis, weekdays only, (approximately 20-30 hours per month with the potential to increase hours after probationary period). I have an immediate vacancy in the Purley area. Self-employed associates also considered with relevant experience. Closing date 4 March 2016. Please contact Kate on tel: 01306 886 883 for an informal discussion and/or send your CV to: info@cnphys.co.uk

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WHITSTABLE, KENT Experienced physiotherapist required for part-time holiday cover in busy GP surgery situated in Seasalter on the outskirts of Whitstable, Kent. Two morning clinics mid-week (other arrangements possible by agreement), up to ten hours, remuneration per patient, rate to be discussed. Email: karenbarsby82@tiscali.co.uk or tel: 07901 900491.

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THE PHYSIO COMPANY CITY, LONDON is recruiting a part time experienced musculoskeletal physio to work in an established corporate, busy clinic and private practice in the City. Excellent manual therapy and rehabilitation skills required together with private practice experience and acupuncture. Good remuneration, a nice working environment and regular in house CPD. Please send CV and covering letter to: amanda@thephysiocompany.co.uk

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THE SAMSON CENTRE FOR MS IS A CHARITY IN GUILDFORD providing physiotherapy for people with Multiple Sclerosis. An exciting opportunity has arisen for the appointment of a part-time deputy lead physiotherapist to support

our lead physiotherapist and team of four physiotherapists and three gym instructors. Applicants should have HCPC registration, full CSP membership; have a minimum five years postgraduation experience, with at least three within neurology and experience of working with Multiple Sclerosis. Experience of running a team, including service development, staff supervision and audit essential. Please send your CV to: info@samsoncentre.org.uk or call tel: 01483 459120 or email for more information. Deadline 4 March.

PART-TIME SELF-EMPLOYED MUSCULOSKELETAL PHYSIO REQUIRED

to join our team at GX Physio in Gerrards Cross, Bucks. Flexible hours, one or two evenings per week or alternate Saturdays. Please email Alison at: gxphysio@gmail.com or call tel: 07866 800658.

LONDON, CENTRAL SOHO Full or part-time self-employed musculoskeletal physiotherapist required to join our multidisciplinary team. We are looking for an experienced and enthusiastic

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covering Tuesdays, Wednesdays and Fridays when we provide specialist palliative care to people with life-limiting illnesses. In addition to one-to-one work, the physiotherapist will be required to provide group support and exercise sessions. Closing date for applications: 29 February. Registered charity number: 1146310. For more information call tel: 01562 756000 or check our website: www.kemphospice.org.uk/about-us/career-opportunities

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ENCOMPASS PHYSIOTHERAPY LTD. is looking for enthusiastic physiotherapists to work at our very busy, and rapidly growing practice. This very well-established, private practice is based in the London Borough of Bromley with clinics in both Chislehurst and Orpington. Therapists will be required to work alone and be confident in their own skills of assessing and treating many and varied neuromusculoskeletal conditions. Successful applicants must be willing to work evenings and/or weekends, however daytime hours are also available. Facilities include use of a large gym and studios

for rehabilitation. Competitive salary, minimum pay equivalent to £36,000 per annum based on a 36 hour week, and busy clinics guaranteed. Please email: encompassphysiotherapy@gmail.com attaching your CV, or call tel: 020 8467 8699.

THE PHYSIOTHERAPY ACADEMY, CHELMSFORD require a self-employed musculoskeletal physiotherapist to join our expanding team. Some evening and weekend cover essential. Our well-established practice offers a variety of referral sources and have close links with a number of professional sports teams. Please email if you want further information and send CVs to: chelmsford@physioacademy.co.uk by 29 February.

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APPROVED PARTNER



ThreeMinutes

Helen Jefford

The specialist physiotherapist celebrated several career highs after winning a CSP award in 2014 for her work with prisoners with COPD. Here she offers *Frontline* readers some tips for success

Why did you enter the CSP awards?

Together with a highly-motivated prison nurse, Nina Turner, I set up and delivered the first pulmonary rehabilitation programme in a prison (a category C prison in Kent). The project was successful in terms of outcomes: huge cost savings and patient feedback, for example. The prison governor shared our vision – that prisoners with chronic obstructive pulmonary disease (COPD) are entitled to high-quality specialist care.

Their lack of knowledge hampered their ability to self-manage their condition and to

know when they were unwell.

This, in turn, had a huge impact on the resources of the healthcare department and on prison staff. We gained

recognition from our trust and won a Nursing Times award in respiratory care in 2013.

I decided that the physiotherapy profession also needed to know about the work we'd done with this 'difficult to reach' group. I wanted to inspire others, to make pulmonary rehabilitation teams think about unmet needs in their local prison.

What did the award mean to you?

Personally, it was lovely to receive a big 'well done' having been qualified for 21 years that year. Professionally, I am pleased that respiratory care got some coverage in the physio world as it's not always seen as the most glamorous of services.

How did it help to raise the profile of COPD problems among prisoners?

As a result of running the programme in prisons we produced a 'how to guide', which is available to prison respiratory healthcare professionals who are interested in following our example. See www.csp.org.uk/node/453188 It has been very well received and we had interest from as far as Australia. We have presented the project and the guide at Association of Respiratory Nurse Specialists' annual meeting. We have also presented to prison staff, physiotherapists and nurses here and abroad.

And you met the prime minister?

We attended an evening event at 10 Downing Street that celebrated the good work of healthcare professionals and voluntary organisations. As a result of winning the awards, we received an invitation by email (which, at first, I thought it was a scam). We spent a couple of hours drinking wine, chatting to others and, of course, 'nosing' in every room we were allowed into. I chatted to the health secretary, Jeremy Hunt, and got a few things off my chest. David Cameron thanked the 100-odd guests for our hard work. I shook his hand

but it was a fleeting exchange. Attending No 10 was the highlight of my professional career so far.

We hear you are forging international links?

We are! Nina and I were invited to present our work in Saskatoon, Saskatchewan, Canada last October. It was an annual international custody and caring conference. We were fortunate in that the director of prisons attended our workshop and took all of our remaining guides. It was a great experience, and we managed to squeeze in an outing to an ice hockey game.

What are the next steps?

My secondment to support the healthcare team in Kent has ended, and I have reviewed the COPD care in my local prison. As this is a high-security institution it will need a slightly different approach. On a visit, perhaps not surprisingly, I found the same issues of patients having limited support with their disease, and I would like to address this with the support of their governor and their healthcare team. Nina is making inroads in her new workplace in another Kent prison.

Any tips on applying for awards?

- Ask yourself 'Have you done something new that has impacted on patients' lives?' and then shout about it.
- Don't ask whether anyone would be interested. Just submit your entry and let others decide.
- Include all the team members that have been involved, get them all on board, as if you are shortlisted, you will all get the opportunity to be fed and watered at a fantastic awards ceremony.
- Put some time aside to apply, or it will slip in the hectic reality of your working week. Good luck! FL

Helen Jefford is a pulmonary rehab lead and specialist physiotherapist with Oxleas NHS Trust

* See also page 30





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